

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Bill Willson
Name

(2) 708 APALACHICOLA Rd
Address (number and street)

Venice, FL 34285
City, State, Zip Code

OFFICE USE ONLY

JUL 20 '20 AM 9:53

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Venice City Council SEAT 2
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 07 / 11 / 2020 To 07 / 17 / 2020 Report Type: P4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 850.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, 850.00

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 168.30

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 168.30

(8) Other Distributions

\$ _____, _____, ~~621.03~~

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,950.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 621.03

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Bill Willson

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Bill Willson
Signature

(Type name) Bill Willson

Candidate Chairperson (only for PC and PTY)

X Bill Willson
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Bill Willson (2) I.D. Number _____

(3) Cover Period 07/11/2020 through 07/17/2020 (4) Page 1 of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
07/13/2020	Wayne Roberts 750 Eagle Point Venice, FL 34285	I	insurance	CHE			250. ⁰⁰
1							
07/13/2020	CAROL BINETTE 320 NASSAU ST Venice, FL 34285	I	Retired	CHE			100. ⁰⁰
2							
07/13/2020	Fred Hind 312 TRIANO CIR, Venice FL 34292	I	Retired	CHE			200. ⁰⁰
3							
07/15/2020	MIKE FULLER 320 NASSAU ST Venice, FL 34285	I	Business owner Funerals				100. ⁰⁰
4							
07/17/2020	ERnie Skinner 247 RIO TRIA Venice, FL 34285	I	Retired				200. ⁰⁰

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bill Willson

(2) I.D. Number _____

(3) Cover Period 07/11/2020 through 07/17/2020

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
07/14/20	ON TRAC Publishing P.O. Box 985 BRADENTON, FL 34206	Advertise ment	CAN		168. ³⁰
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