

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Patricia Anne Kemp  
 Name

(2) 5408 Seminole Avenue  
 Address (number and street)

Tampa, FL 33604  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1064642]

Submitted on:  
 6/9/2014 13:52:23 (eastern)

Check here if address has changed

(3) ID Number: 1035

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner, Dist. 7
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 4 / 1 / 2014 To 4 / 30 / 2014 Report Type: M4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 19 , 353 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 249 . 97

### (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) \_\_\_\_\_

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

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Patricia Anne Kemp (2) I.D. Number 1035  
 (3) Cover Period 4/1/2014 through 4/30/2014 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
4/29/2014 / /	Hernandez, Maria 18102 2nd St E Redington Shores, FL 33708	I	consultant	CH		Delete	\$25.00
1							
4/29/2014 / /	Long, Susan 921 E. Broad Street Tampa, FL 33604	I	cpa	CH		Add	\$25.00
2							
4/29/2014 / /	Schwartz, Lawrence 6425 S. Adelia Avenue Tampa, FL 33616	I	retired	CH		Delete	\$100.00
3							
4/29/2014 / /	Schwartz, Lawrence 6425 S. Adelia Avenue Tampa, FL 33616	I	retired	CH		Add	\$0.00
4							
4/29/2014 / /	Davis, Helen Gordon 4902 Bayshore Blvd Apt 713 Tampa, FL 33611	I	retired	CH		Delete	\$150.00
5							
4/29/2014 / /	Davis, Helen Gordon 4902 Bayshore Blvd Apt 713 Tampa, FL 33611	I	retired	CH		Add	\$250.00
6							
4/29/2014 / /	Bean, Norma 610 S. Rome Avenue Tampa, FL 33606	I	retired	CH		Delete	\$100.00
7							
4/29/2014 / /	Shaw, Sean 930 E. Idlewild Ave. Tampa, FL 33604	I	attorney	CH		Add	\$100.00
8							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Patricia Anne Kemp (2) I.D. Number 1035

4/1/2014 through 4/30/2014

(3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
4/29/2014 / /	Wind, Alexander 5408 N. Seminole Avenue #A Tampa, FL 33604	I	student	CH		Delete	\$50.00
9							
4/29/2014 / /	Williamson, Julie 5207 Seminole Avenue Tampa, FL 33604	I	personal trainer	CH		Add	\$50.00
10							
/ /							
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/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Patricia Anne Kemp

(2) I.D. Number 1035

(3) Cover Period 4/1/2014 through 4/30/2014

(4) Page 1 of 0

(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					
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