

## CAMPAIGN TREASURER'S REPORT SUMMARY

**OFFICE USE ONLY**  
 ONLINE SUBMISSION

(1) Katy Sorenson  
 Name

(2) 13200 SW 69th Avenue  
 Address (number and street)

Pinecrest, FL 33156  
 City, State, Zip Code

Check here if address has changed

(3) ID Number: 27

(4) Check appropriate box(es):

- Candidate Office Sought: County Commission District 08
- 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 8 / 17 / 2002 To 9 / 5 / 2002 Report Type: F3

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 \$        ,        , -95 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , -95 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 139 , 774 . 26

### (10) TOTAL Monetary Expenditures To Date

\$        , 119 , 632 . 04

### (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 Katy Sorenson (2) I.D. Number 27

8/17/2002 through 9/5/2002

(3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 1 of 0

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

(1) Name Katy Sorenson

(2) I.D. Number 27

(3) Cover Period 8/17/2002 through 9/5/2002

(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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