CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Deborah Lilley	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1090134]						
(2) 21238 Coachman Ave	Submitted on:						
Address (number and street) Port Charlotte, FL 33952	8/8/2015 11:32:35 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 444						
(4) Check appropriate box(es):							
Candidate Office Sought: <u>Clerk Of The</u>	Circuit Court						
Political Committee (PC)  Communications One (ECO)	Check have if DC as 500 has disharded						
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	Check here if PC or ECO has disbanded Check here if PTY has disbanded						
Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed						
individual making electioneering communications)							
(5) Report Identifiers							
Cover Period: From 7 / 1 / 2015 To	7 / <u>31</u> / <u>2015</u> Report Type: <u>M7</u>						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$ , , , 0 . 00	Expenditures \$ , , <u>130</u> . <u>00</u>						
Loans \$,,0.	Transfers to						
	Office Account \$,,,0 . 00						
Total Monetary \$ , , 0.00							
	Total Monetary \$,, 130 . 00						
In-Kind \$,,000							
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>300</u> . <u>00</u>	\$,, <u>150</u> . <u>90</u>						
(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, cor							
(Type name)	(Type name)						
or electioneering comm.)							
x	x						
Signature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name (2) I.D. Number					e <b>r</b> 4	444	
	7/1/2015	7/31/2015						
(3) Cover Perio	od/ /	thro	bugh	1 1	(4) Pag	e <sup>1</sup>	of <sup>0</sup>	
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(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name				2000,000,000	200122 2002	3 <b>3</b> 0020 - <b>1</b> 3	
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	Co	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Debo		PENDITURES Number 444			
	7/1/2015 7/ 1 / / through	31/2015	I) Page <u>1</u>		1
(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)
(6) Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount
1	DWC of IRCTraining Program, PO Box 651144 Vero Beach, FL 32965	candidate & staff training	МО		\$130.00
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