

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Theressa Amanda Foster West
Name

(2) 6454 W Corral Place
Address (number and street)

Beverly Hills, FL 34465
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1237133]

Submitted on:
10/30/2020 10:09:27 (eastern)

Check here if address has changed (3) ID Number: 461

(4) Check appropriate box(es):

Candidate Office Sought: Mosquito Control Board - Seat 2

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 9 / 19 / 2020 To 10 / 2 / 2020 Report Type: G4

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 \$, 2 , 627 . 40

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 2 , 627 . 40

(8) Other Distributions
\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
\$, 30 , 470 . 00

(10) TOTAL Monetary Expenditures To Date
\$, 28 , 115 . 40

(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 Theressa Amanda Foster West (2) I.D. Number 461

9/19/2020 through 10/2/2020

(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 Theressa Amanda Foster West

(2) I.D. Number 461

(3) Cover Period 9/19/2020 through 10/2/2020

(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
9/23/2020 / /	WXOF FM, 964 S Crystal Glen Dr Lecanto, FL 34461	radio advertising	MO	Add	\$1,896.00
1					
9/23/2020 / /	Extreme Decalz, 2412 W Lawrence Ct Dunnellon, FL 34434	signs & banners	MO	Add	\$731.40
2					
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