FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Tillman Kasper W/D	OFFICE USE ONLY						
Name (2) 6218 Carranza Dr.	ONLINE SUBMISSION						
Address (number and street)	[1028418] Submitted on:						
Jacksonville, FL 32216	4/10/2011 23:11:49 (eastern)						
City, State, Zip Code  ☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number: 222						
(4) Check appropriate box(es):	(6) 12 13 13 13 13 13 13 13 13 13 13 13 13 13						
	istrict 4  CHECK IF PC HAS DISBANDED						
☐ Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED						
☐ Party Executive Committee	CUECK IE NO OTHER ELECTIONEERING						
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED						
7/1/2010	9/30/2010						
Cover Period: From / / To	/ / Report Type <sup>Q3</sup>						
☐ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$	Monetary Expenditures \$ -140.00						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total Monetary \$ -140.00						
In-Kind \$							
	(8) Other Distributions \$ 0.00						
(9) TOTAL Monetary Contributions To Date \$6,072.56_	(10) TOTAL Monetary Expenditures To Date \$						
	IFICATION						
It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true,	on 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. correct, and complete.							
(Type name)  Individual (only for Treasurer Deputy Treasurer	(Type name)  Candidate Chairperson (only for PC, PTY &						
election eering commun.)	electioneering commun. organization)						
Signature	X Signature						
Signature	Signature						

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name	Tillman Kasper W/D				ال . Numbe	2	22
	7/1/2010		9	/30/2010			
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(5)	(7)	3)	3)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Contr	ibutor	Contribution	In-kind		
				ACCURACIONAL ACCUR		Amendment	A
Number	City, State, Zip Code	Type O	ccupation	Туре	Description	Amendment	Amount
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name $\underline{}$	illman	Kaspe	er W/D				 (2) I.D. Num	nber	4	222	av.
	-	7/1/203	10		9/30/20	010					
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(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
7/27/2010	Kasper, Tillman 6218 Carranza Drive Jacksonville, FL 32216	cash withdrawal for postage.	МО	Delete	\$140.00
7/27/2010	Kasper, Tillman 6218 Carranza Drive Jacksonville, FL 32216	payment for postage. (noted in q2)	МО	Add	\$0.00
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