CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Name PO Box 2722	OFFICE USE ONLY ONLINE SUBMISSION [1111303]					
(2)	Address (number and street) Bunnell, FL 32110 City, State, Zip Code	Submitted on: 7/8/2016 13:36:59 (eastern)					
(4)	Check here if address has changed (3) ID Number: 318						
(5) Report Identifiers Cover Period: From 6 / 1 / 2016 7 0 6 / 24 / 2016 Report Type: P1 ☐ Original Amendment ☐ Special Election Report							
	Contributions This Report	(7) Expenditures This Report					
	n & Checks \$,,,0	Monetary Expenditures \$, , , 0 . 00					
Tota	I Monetary \$,,	Office Account \$					
III-IXI	In-Kind \$,,						
(9) TOTAL Monetary Contributions To Date \$,11,67161_ \$,5,44240_							
(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.) Deputy Treasurer or electioneering comm.) X Signature X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Kaiti Lenhart				318				
	6/1/2016			6/24/	2016				
(3) Cover Perio	a /	1	through	1	1	(4) Page	1	of	1

(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12)
6/2/2016	Kegley, Robert PO Box 350365 Palm Coast, FL 32135	İ		СН		Delete	\$50.0
6/17/2016	Kegley, Robert PO Box 350365 Palm Coast, FL 32135	I		СН		Add	\$50.(
6/2/2016	Baird, Maureen 2905 Eastwood Street Inverness, FL 34452	I		СН		Add	\$50.0
6/21/2016	West, Brad Individual 44 Lee Drive Palm Coast, FL 32137	I	occupation	ıIK	video production	Add	\$200.0
6/20/2016 / /	West, Brad 44 Lee Drive Palm Coast, FL 32137	I		СН		Delete	\$50.0
6/20/2016 / /	West, Brad 44 Lee Drive Palm Coast, FL 32137	I		СН		Add	\$20.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Kaiti Lenhart (2) I.D. Number 318								
(3) Cover Period	6/1/2016 d/through	4/2016 // (4	l) Page <u>1</u>	of_	0			
(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			
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