	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Shara Lisa Brodsky	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	33 Wynnfield Dr	Submitted on:					
	Address (number and street)	1/9/2024 09:56:51 (eastern)					
	Palm Coast, F1 32164 City, State, Zip Code						
	_	(2) ID Missach and					
/ A\	Check here if address has changed	(3) ID Number: 669					
(4)	Check appropriate box(es):	to Govern Markey Biskerick 1					
		ty Council Member District 1					
		☐ 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					
Cove	er Period: From 10 / 1 / 2023 To	12 / 31 / 2023 Report Type: Q4					
X O	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Cash	h & Checks \$, , _10 . 00	Expenditures \$, , 0 . 00					
	Φ 0.00						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$					
T-1-	9 10 00	Office Account \$, , , 0 . 00					
lota	Il Monetary \$, , , 00	Total Monetary \$. 0 . 00					
i. Z		Total Monetary \$, , 0 . 00					
In-Ki	ind \$,,,000	(0) Other Dietaihtions					
		(8) Other Distributions \$, , 000_					
		,, <u>,,,</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>10</u> 00_	\$, , <u>0</u> . <u>00</u>					
	(11) Cert It is a first degree misdemeanor for any perso						
١c	certify that I have examined this report and it is true, corre						
	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
х		X					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Shara Lisa Brodsky (2) I.D. Number 669								
	10/1/2023 od///		12/31/2023	(4) Pag	ge <u>1</u>	of		
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contributor	(9)	(10) In-kind	(11)	(12)		
Number 12/18/2023 / 1	City, State, Zip Code Brodsky , Shara Lisa 33 Wynnfield Drive Palm coast , Fl 32164	Type Occupation S retail manager	Type CA	Description	Amendment	Amount \$10.0		
1 1								
1 1								
1 1								
J I								
J I								
1 1								
1 1	-							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name _		ara Lisa Brodsky					(2) I.D. Number			KLS	669	
(3) Cover Po	eriod _	10/1/2	023	through	2/31/2	2023	(4)Page	1	of _	0	
	T		r	2)	1	(0)		(0)	1	(40)	(4.4)	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6)	Full Name (Last, Suffix, First, Middle) Street Address &	Purpose (add office sought if contribution to a	Expenditure		
Sequence Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount
//					
				5	
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//					
11					
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DS-DE 14 (Rev.					