	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Gregory Blake Kirshy	OFFICE USE ONLY ONLINE SUBMISSION								
(0)	Name	[1257523]								
(2)	19571 Lily Pond Ct.	Submitted on:								
	Address (number and street) Brooksville, Fl 34601	3/24/2022 13:51:54 (eastern)								
	City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number: 527								
(4)	Check appropriate box(es):									
\ · /										
	(5) Report	Identifiers								
Cove	er Period: From 3 / 9 / 2022 To									
X O	Original Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
,	h & Checks \$, , 0 . 00	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	Il Monetary \$, , 0 . <u>00</u>	Total Monetary \$, , 0 . 00								
In-Ki	ind \$,,, 0.00									
		(8) Other Distributions \$, , 000								
(9)	(9) TOTAL Monetary Contributions To Date \$\[\begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \									
(T	(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									
X		x								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Gregory Blake Kirsh	У			2) I.D. Numbe	r5	27
	3/9/2022		6	/9/2022			
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Page	e <u>1</u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code		ontributor Occupation	Contribution	In-kind Description	Amendment	Amount
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Gregory	y Blake	e Kirs	hy			 (2) I.D. Nun	nber	Ę	527	
		3/9/20	22		6/9/202	2					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(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
3/9/2022	Kirshy, Gregory Blake 19571 Lily Pond Ct Brooksville, FL 34601	self loan repayment	DI		\$270.00
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DS-DE 14 (Rev	44(40.)				