

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lisa Allen  
 Name  
 \_\_\_\_\_  
 Address (number and street)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1165376]

Submitted on:  
 8/5/2018 12:58:10 (eastern)

Check here if address has changed

(3) ID Number: 1566

(4) Check appropriate box(es):

- Candidate Office Sought: County Court Judge, Grp. 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 7 / 28 / 2018 To 8 / 3 / 2018 Report Type: P5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,   1   , 000 . 00

Loans \$        ,        ,   0   . 00

Total Monetary \$        ,   1   , 000 . 00

In-Kind \$        ,        ,   0   . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 154 . 30

Transfers to Office Account \$        ,        ,   0   . 00

Total Monetary \$        ,        , 154 . 30

### (8) Other Distributions

\$        ,        ,   0   . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,   28   , 275 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,   21   , 330 . 60

### (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     Lisa Allen     (2) I.D. Number     1566      
 (3) Cover Period     7/28/2018     through     8/3/2018     (4) Page     1     of     1    

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
7/31/2018 / /	Levin, Michael 3110 Dunwoodie St. Tampa, FL 33629	I	financial advisor	CH			\$1,000.00
1							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Lisa Allen

(2) I.D. Number 1566

(3) Cover Period 7/28/2018 through 8/3/2018

(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
(6) Sequence Number					
7/30/2018 / /	Doyle Design LLC, 4313 S. Thatcher Ave. Tampa, FL 33611	website expense	MO		\$100.00
1					
7/31/2018 / /	Stripe.com, 185 Berry St. Ste. 550 San Francisco, CA 94107	payment processing fees	MO		\$29.30
2					
7/31/2018 / /	Bank of Tampa, 601 Bayshore Blvd. Tampa, FL 33606	bank service charge	MO		\$25.00
3					
/ /					
/ /					
/ /					
/ /					
/ /					