	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Patricia "Pat" Kemp	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)		Submitted on:								
	Address (number and street)	2/2/2021 20:03:17 (eastern)								
	City, State, Zip Code	<del></del>								
	☐ Check here if address has changed	(3) ID Number: 1817								
(4)	Check appropriate box(es):	(4)								
۱٠,	☐ Candidate Office Sought: County Commis	ssioner, Dist. 6								
	Political Committee (PC)									
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded								
	<ul><li>☐ Party Executive Committee (PTY)</li><li>☐ Independent Expenditure (IE) (also covers an</li></ul>	<ul> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	individual making electioneering communications)									
	(5) Repor	t Identifiers								
Cove	er Period: From 10 / 30 / 2020 To									
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(0)	Contributions This Report	Monetary								
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , 8 , 203 . 29								
Loar	s \$,,,000	Transfers to								
		Office Account \$ , , 0 . 00								
Tota	I Monetary \$ , ,000									
	•	Total Monetary \$ , 8 , 203 . 29								
In-Ki	nd \$ , , <u>00</u> . <u>00</u>									
		(8) Other Distributions \$ , , 0.00								
		\$,, <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>264</u> , <u>162</u> . <u>60</u>								
	(44) Con	tification								
		son to falsify a public record (ss. 839.13, F.S.)								
Ιc	I certify that I have examined this report and it is true, correct, and complete:									
(Ty	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	Patricia "Pat&#	34; Kemp		2) I.D. Numbe	er	817
(3) Cover Perio	10/30/2020 od////		2/1/2021 //	(4) Pag	je <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
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1 1						
1 1						
1 1						
1 1						
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J I						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Patricia	a "	:Pat&	34; Kemp			(2) I.D. Nun	nber	1	.817	-
	1	10/30/	2020		2/1/2021		•- •				
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	2	

(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
11/4/2020	ActBlue, PO Box 441146 Somerville, MA 02144	credit card fee	МО		\$272.72
1					
11/10/2020	ActBlue, PO Box 441146 Somerville, MA 02144	credit card fee	MO		\$1,473.33
12/3/2020	Sligh Strategies, 1234 E 5th Ave Tampa, FL 34605	consulting	MO		\$5,000.00
12/3/2020	ActBlue, PO Box 441146 Somerville, MA 02144	credit card fee	МО		\$1.21
12/3/2020	Bank of America, PO Box 25118 Tampa, FL 33622	bank fee	МО		\$30.00
12/9/2020	ActBlue, PO Box 441146 Somerville, MA 02144	credit card fee	МО		\$18.94
7	Bank of America, PO Box 25118 Tampa, FL 33622	bank fee	МО		\$17.00
1/11/2021	ActBlue, PO Box 441146 Somerville, MA 02144	credit card fees	МО		\$1.35
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Patrici	La "	:Pat&	34; Kemp			(2) I.D. Nun	nber	1	817	
		10/30/	2020		2/1/2021						
(3) Cover P	eriod	1	1	through	1	1	(4) Page	2	of	2	

(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
2/1/2021	Bank of America, of PO Box 25118 Tampa, FL 33622	bank fee	МО		\$17.00
9					
1/31/2021	Sligh Strategies, 1234 E 5th Ave Tampa, FL 34605	consulting fees	МО		\$1,371.74
10					
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//					
3					
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