	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	TK Mathew	OFFICE USE ONLY						
•	Name	ONLINE SUBMISSION [1212233]						
(2)	P. O. Box 46275	Submitted on:						
	Address (number and street)	Submitted on: 6/19/2020 18:20:42 (eastern)						
	Tampa, FL 33646	0,15,2020 10:20:12 (cascern,						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1833						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: Tax Collector							
	Political Committee (PC)	Charle have if DC as ECO has dishanded						
		☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	I Identifiers						
Cove	er Period: From 6 / 1 / 2020 To							
<u> </u>	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$ , , ,000	Expenditures \$ ,22 , _200 . 66						
•	<b>o</b> 00							
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$						
Tato	al Monetary \$ , , 0 . 00	Office Account \$ , , , 0 . 00						
Tota	al Monetary \$ , ,000	Total Monetary \$ . 22 200 . 66						
In Ki	· \$ 0 00	Total Monetary \$ , _22 , 200 . 66						
In-Ki	ind \$,,,000	(O) Other Dietaihtiene						
	1	(8) Other Distributions \$ , , 0 00_						
		Ψ , , <del>-</del>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>24</u> , <u>244</u> . <u>99</u>						
	(11) Cert It is a first degree misdemeanor for any perso							
اء								
10	I certify that I have examined this report and it is true, correct, and complete:							
_(T	ype name)	(Type name)						
	Individual (only for IE  Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		×						
	ignature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	TK Mathew				2) I.D. Numbe	er <u>1</u>	833
(3) Cover Perio	6/1/2020 od///	thro		/12/2020 //	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8)  ontributor  Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
/ /	Oity, Otate, 219 Oode	Турс	Cccupation	Турс	Description		Amount
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J 1							
I I							
J I							

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) NameTK	) Name TK Mathew						 (2) I.D. Nun	nber	1833		
	6,	/1/20	20		6/12/2	020					
(3) Cover Per	riod	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
6/9/2020	Supervisor of Elections, 2514 North Falkenberg Rd Tampa, fl 33602	qualifying fee.	MO		\$10,200.66
6/12/2020	Mathew, TK PO BOX 46275 TAMPA, FL 33646	loan reimbursements.	RM		\$12,000.00
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