CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Kevin R Kerrigan	OFFICE USE ONLY					
Name	ONLINE SUBMISSION					
(2) 12927 Timber View	Submitted on:					
Address (number and street) Tampa, FL 33647	7/29/2020 14:58:02 (eastern)					
City, State, Zip Code						
☐ Check here if address has changed	(3) ID Number: 1960					
(4) Check appropriate box(es):						
 ☐ Candidate Office Sought: Supervisor, Arbor Greene CDD, Seat 5 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 						
(5) Report	t Identifiers					
Cover Period: From 7 / 18 / 2020 To	7 / 24 / 2020 Report Type: P5					
	ecial Election Report					
(6) Contributions This Report (7) Expenditures This Report						
Cash & Checks \$,,,,000	Monetary					
Loans \$,,,0.00	Transfers to Office Account \$, , , 0 . 00					
Total Monetary \$	Total Monetary \$, , , 0 . 00					
In-Kind \$, , 0 . 00	(8) Other Distributions \$, , 000_					
(9) TOTAL Monetary Contributions To Date \$, , 7500_	(10) TOTAL Monetary Expenditures To Date \$,,					
It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true, corr (Type name) Individual (only for IE	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)					
X Signature	X Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Kevin R Kerrigan</u>			(2) I.D. Number					
	7/18/2020			/24/2020				
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	1	of	
		r		T				
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &		ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Document	Amendment	Amount	
7/24/2020	KERRIGAN, KEVIN 17927 Timber View St	I		CA	nothing collected		\$0.0	
J I	Tampa, FL 33647				Corrected			
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

) Name <u>Kevin</u>	7/18/2020 7/	(2) I.D. Numbei		1960
) Cover Period _	// 10/ 2020 // /through		4) Page <u>1</u>	of	0
(5) Date (6) Sequence Number	(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)	(11)
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SS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES						