	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
( ' /	Kristi Lee Burns	OFFICE USE ONLY ONLINE SUBMISSION								
	Name 9057 Silver Lake Drive	[1223786]								
\ <del>-</del> /	Address (number and street)	Submitted on:								
	Leesburg, FL 34788	8/7/2020 14:31:54 (eastern)								
_	City, State, Zip Code	<del></del>								
	Check here if address has changed	(3) ID Number: 371								
(4)	Check appropriate box(es):									
	Check appropriate box(es):    Candidate									
	(5) Report	Identifiers								
Cover	r Period: From 7 / 25 / 2020 To	7 / 31 / 2020 Report Type:P6								
X Ori	iginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	& Checks \$,, _50 . 00	Monetary								
Loans		Transfers to Office Account \$ , , , 0 . 00								
	Monetary \$,,,	Total Monetary \$ , , 0 . 00								
In-Kin	nd \$,, <u>0</u> .00									
		(8) Other Distributions \$ , , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>11</u> , <u>550</u> . <u>00</u>	\$, <u>1</u> , <u>589</u> . <u>76</u>								
I ce	(11) Cert  It is a first degree misdemeanor for any person ertify that I have examined this report and it is true, corre	on to falsify a public record (ss. 839.13, F.S.)								
☐ Ir	pe name)  ndividual (only for IE	(Type name)  ☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
Sia	nature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Kristi Lee Burns			(3	2) I.D. Numbe	er3	71
	7/25/2020 od///		7/3	1/2020	(4) Pag	e	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)  Contrib	utor C	(9) Contribution Type	(10) In-kind Description	(11)	(12)
7/27/2020 /	Hepting, Jane L 206 Magnolia Circle Eustis, FL 32726	I reti lawy	ired C	CH	·		\$50.0
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## **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name _	0.0-10-10-10		TOTAL TO THE PERSON				 (2) I.D. N	lum	ber		371	
(3) Cover F		7/25/20 /	)20 /	through	7/31/20 /	20 /	 (4) Page	<u> </u>	1	of	0	

(5) Date	(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
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