

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kelly Otte  
 Name  
 (2) 1075 Alameda Drive  
 Address (number and street)  
Tallahassee, FL 32317  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1230937]  
 Submitted on:  
 9/14/2020 21:47:25 (eastern)

Check here if address has changed

(3) ID Number: 594

(4) Check appropriate box(es):

- Candidate Office Sought: Leon County Commission - At Large, Group 1
- 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 8 / 22 / 2020 To 9 / 4 / 2020 Report Type: 20G2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 51 , 978 . 01

### (10) TOTAL Monetary Expenditures To Date

\$        , 38 , 026 . 48

### (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 Kelly Otte (2) I.D. Number 594  
 8/22/2020 through 9/4/2020  
 (3) Cover Period / / through / / (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number						
8/31/2020 / /	Gunter, 515 South Ride Tallahassee, FL 32303	I human resource	CH		Delete	\$250.00
1						
8/31/2020 / /	Gunter, Jennifer 515 South Ride Tallahassee, FL 32303	I human resource	CH		Add	\$250.00
2						
9/4/2020 / /	Otte, 473 N Rolling Thunder Dr Green Valley, AZ 85614	I retired	CH		Delete	\$250.00
3						
9/4/2020 / /	Otte, Phillip 473 N Rolling Thunder Dr Green Valley, AZ 85614	I retired	CH		Add	\$250.00
4						
8/26/2020 / /	Blue, Shoni 8110 119th Street East Puyallup, WA 98373	I self	CH		Delete	\$250.00
5						
8/26/2020 / /	Blue, Shoni 8110 119th Street East Puyallup, WA 98373	I software engineer	CH		Add	\$250.00
6						
8/25/2020 / /	Dozier, Kelly 2101 East Randolph Circle Tallahassee, FL 32308	I self	CH		Delete	\$250.00
7						
8/25/2020 / /	Dozier, Kelly 2101 East Randolph Circle Tallahassee, FL 32308	I administra tor	CH		Add	\$250.00
8						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Kelly Otte (2) I.D. Number 594  
 (3) Cover Period 8/22/2020 through 9/4/2020 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
8/28/2020 / /	Sperry, Todd 2275 Trescott Dr Tallahassee, FL 32308	I	self	CH		Delete	\$150.00
9							
8/28/2020 / /	Sperry, Todd 2275 Trescott Dr Tallahassee, FL 32308	I	business owner	CH		Add	\$150.00
10							
9/3/2020 / /	Frazier, Sandra 2017Sumter Dr Tallahassee, FL 32301	I	self	CH		Delete	\$250.00
11							
9/3/2020 / /	Frazier, Sandra 2017Sumter Dr Tallahassee, FL 32301	I	realtor	CH		Add	\$250.00
12							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Kelly Otte

(2) I.D. Number 594

(3) Cover Period 8/22/2020 through 9/4/2020

(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					
8/22/2020 / /	Brown, Carlyle need address Tallahassee, FL 32301	sign waiving	MO	Delete	\$603.75
1					
8/22/2020 / /	Brown, Carlyle 1510 Soupe Tallahassee, FL 32310	sign waiving	MO	Add	\$603.75
2					
8/22/2020 / /	Sturges, Ben need address Tallahassee, FL 32301	sign waiving	MO	Delete	\$120.00
3					
8/22/2020 / /	Sturges, Ben 2034 Atapha Nene Tallahassee, FL 32301	sign waiving	MO	Add	\$120.00
4					
/ /					
/ /					
/ /					
/ /					