

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Carol Whitmore  
 Name  
 (2) 8324 Marina Dr  
 Address (number and street)  
Holmes Beach, FL 34217  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1171901]  
 Submitted on:  
 9/7/2018 16:57:16 (eastern)

Check here if address has changed

(3) ID Number: 1534

(4) Check appropriate box(es):

- Candidate Office Sought: COUNTY COMMISSION - DIST. 6 - AT LRG
- 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 / 24 / 2018 To 8 / 31 / 2018 Report Type: G1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 950 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 950 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 800 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 800 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 93 , 928 . 44

### (10) TOTAL Monetary Expenditures To Date

\$      , 73 , 244 . 25

### (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 Carol Whitmore (2) I.D. Number 1534  
 8/24/2018 through 8/31/2018  
 (3) Cover Period / / through / / (4) Page 1 of 1

(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		Type	Occupation	Type	Description	Amendment	Amount
8/24/2018 / /	Mayer, MD, Zoltan 4532 Barracude Dr. Bradenton, Fl 34208	I	physician, pathologis t	CH			\$200.00
1							
8/24/2018 / /	Chatham, Jr. MD, James R 5915 Riverview Blvd. Bradenton, Fl 34209	I	physician, radiologis t	CH			\$250.00
2							
8/24/2018 / /	Matrix Pulmonary, PA, 2401 Manatee Ave. W. Bradenton, Fl 34205	B	pulmonolog ist	CH			\$500.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Carol Whitmore

(2) I.D. Number 1534

(3) Cover Period 8/24/2018 through 8/31/2018

(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					
8/28/2018 / /	Ghaffari, Nader 6609 Riverview Blvd. Bradenton, Fl 34209	signs	MO		\$400.00
1					
8/28/2018 / /	Coombs, Tim 6 Cherry Ave. Bradenton, Fl 34207	signs	MO		\$400.00
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					