

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) KATHY BRYANT  
 Name  
 (2) 4110 SW 30TH CT  
 Address (number and street)  
OCALA, FL 34474  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1148105]  
 Submitted on:  
 1/10/2018 13:57:59 (eastern)

Check here if address has changed (3) ID Number: 403

(4) Check appropriate box(es):  
 Candidate Office Sought: COUNTY COMMISSIONER - 2  
 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 12 / 1 / 2017 To 12 / 31 / 2017 Report Type: M12  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,   9   , 250 . 00  
 Loans \$      ,      ,   0 . 00  
 Total Monetary \$      ,   9   , 250 . 00  
 In-Kind \$      ,      ,   0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,   1   , 200 . 00  
 Transfers to Office Account \$      ,      ,   0 . 00  
 Total Monetary \$      ,   1   , 200 . 00

**(8) Other Distributions**  
 \$      ,      ,   0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,  18  , 100 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,   1  , 200 . 00

### (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 EXPENDITURES**

(1) Name KATHY BRYANT

(2) I.D. Number 403

(3) Cover Period 12/1/2017 through 12/31/2017

(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					
12/1/2017 / /	Veterans USA, Inc., Veterans Helping 2730 E SS Blvd. Unit 200 Ocala, FL 34470	event sponsor	MO		\$1,000.00
1					
12/8/2017 / /	Kiwanis Club of Ocala, P.O. Box 682 Ocala, FL 34478	event sponsor	MO		\$200.00
2					
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