

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) KATHY BRYANT  
**Name**  
 (2) 2052 SE 62ND ST  
**Address (number and street)**  
OCALA, FL 34480  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1027295]  
 Submitted on:  
 1/31/2011 20:43:01 (eastern)

**CHECK IF ADDRESS HAS CHANGED** (3) ID Number: 133

(4) **Check appropriate box(es):**  
 Candidate (office sought): COUNTY COMMISSIONER - 2  
 Political Committee  **CHECK IF PC HAS DISBANDED**  
 Committee of Continuous Existence  **CHECK IF CCE HAS DISBANDED**  
 Party Executive Committee  **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**  
 Electioneering Communication

**(5) REPORT IDENTIFIERS**

Cover Period: From 4/1/2010 To 7/16/2010 / Report Type F1  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

|                |    |               |
|----------------|----|---------------|
| Cash & Checks  | \$ | <u>0.00</u>   |
| Loans          | \$ | <u>0.00</u>   |
| Total Monetary | \$ | <u>0.00</u>   |
| In-Kind        | \$ | <u>174.17</u> |

**(7) EXPENDITURES THIS REPORT**

|                             |    |             |
|-----------------------------|----|-------------|
| Monetary Expenditures       | \$ | <u>0.00</u> |
| Transfers to Office Account | \$ | <u>0.00</u> |
| Total Monetary              | \$ | <u>0.00</u> |

**(8) Other Distributions**  
 \$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
 \$ 78,290.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 68,615.85

**(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.<br>(Type name) _____<br><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer<br><b>X</b> _____<br>Signature | I certify that I have examined this report and it is true, correct, and complete.<br>(Type name) _____<br><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)<br><b>X</b> _____<br>Signature |
|---|---|

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name KATHY BRYANT (2) I.D. Number 133

4/1/2010 through 7/16/2010  
 (3) Cover Period        /        /        through        /        /        (4) Page 1 of 1

| (5)<br>Date     | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type      Occupation |            | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-----------------|--|--|------------|-----------------------------|--------------------------------|-------------------|----------------|
| 7/8/2010<br>/ / | Silvera, Evelio<br>PO Box 3593<br>Ocala, FL 34478  | I  | consultant | IK                          | website                        | Add               | \$150.00       |
| 1               |  |  |            |                             |                                |                   |                |
| 7/8/2010<br>/ / | Bryant, Kathy<br>2052 SE 62nd ST<br>Ocala, FL 34480  | I  |            | IK                          | domain<br>name                 | Add               | \$24.17        |
| 2               |  |  |            |                             |                                |                   |                |
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name KATHY BRYANT

(2) I.D. Number 133

(3) Cover Period 4/1/2010 through 7/16/2010

(4) Page 1 of 0

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |  |                            |                   |                |
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