CAMPAIGN TREASUR	ER'S REPORT SUMMARY								
(1) Mona Clark Name	OFFICE USE ONLY ONLINE SUBMISSION [1158570]								
Address (number and street) Key West, FL 33040 City, State, Zip Code	Submitted on: 6/28/2018 13:58:43 (eastern)								
Check here if address has changed (3) ID Number: 418 (4) Check appropriate box(es): Candidate Office Sought: Key West Utility Board Member Seat A Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed									
(5) Repo	rt Identifiers								
	o 6 / 22 / 2018 Report Type: P1 pecial Election Report								
(6) Contributions This Report	(7) Expenditures This Report								
Cash & Checks \$, , <u>300</u> . <u>00</u>	Monetary Expenditures \$, , 1 . 00								
Loans \$,,,00 Total Monetary \$, , 300 . 00	Transfers to Office Account \$, , , 0 . 00								
In-Kind \$,,000	Total Monetary \$, , , 1 . 00								
	(8) Other Distributions \$, , 000								
(9) TOTAL Monetary Contributions To Date \$,, _55000	(10) TOTAL Monetary Expenditures To Date \$, , 100								
	ertification reson to falsify a public record (ss. 839.13, F.S.) errect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)								
Signature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Mona Clark				2) I.D. Numbe	er	18
	6/1/2018		6	/22/2018		1	1
(3) Cover Peri	od / /	thro	ough	11_	(4) Pag	le	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6/22/2018	Fabal, Rita 2825 Venetian Drive Key West, FL 33040	Î	retired	CH			\$300.0
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1							
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1 1							
/ /							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _M	Iona	Clark	2	100	2000	100 TO THE TOTAL THE	100000000000000000000000000000000000000		 (2) I.D. Nun	nber		418	r
		6/1	/20	18			6/22/2	018		-			
(3) Cover Pe	eriod		1	1	th	rough	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
6/8/2018	Supervisor of Elections, 530 Whitehead St. #101 Key West, FL 33040	election assessment ck. #100	MO		\$1.00
1				5	
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