	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Karl Anthony Norton Pearson	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	309 Timber Grove Court	Submitted on:							
	Address (number and street)	7/24/2022 18:12:33 (eastern)							
	Orlando, FL 32828								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:1116							
(4)	Check appropriate box(es):								
	Candidate Office Sought: County Commis	sioner 4							
	☐ 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	Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
(5) Report Identifiers									
Cove	er Period: From 7 / 16 / 2022 To	7 / 22 / 2022 Report Type: P4							
× o		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(-)	Communication of the point	Monetary							
Cash	n & Checks \$, , 500 . 00	Expenditures \$, , 0 . 00							
		<u> </u>							
Loans \$,,, _0.00		Transfers to							
		Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , <u>500</u> . <u>00</u>								
		Total Monetary \$, , 0 . 00							
In-Kind \$									
		(8) Other Distributions							
		\$, , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ 1,600.00	\$, , 0.00							
		tification on 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:									
_(T	ype name)	_(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		×							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Karl Anthony Norton	Pearson		2) I.D. Numbe	er	116
	7/16/2022		7/22/2022		1	1
(3) Cover Perio	d/	through		(4) Pag	je <u> </u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupat	Contribution ion Type	In-kind Description	Amendment	Amount
F /00 /0000	Haapala, Linda 3470 Smart Rd	I salesma		Description	7 Michael	\$500.0
	Sult Ste. Marie , MI 49783					
1						
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1 1						
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1 1						
I I						
1 1						
1 1						

C I) Name <u>Karl</u>	AMPAIGN TREASURER'S R Anthony Norton Pearson	(2		EXPENDITURES) I.D. Number		
3) Cover Period _	7/16/2022 7/ / / through	22/2022	4) Page <u>1</u>		0	
(5) Date (6) Sequence Number	(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)	(11)	
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