| CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | | | | |
|-------------------------------------|---|---|--|--|--|--|--|--|--|--|
| (1) | Angie Gallo | OFFICE USE ONLY | | | | | | | | |
| | Name | ONLINE SUBMISSION | | | | | | | | |
| (2) | 14842 Bonnybridge Dr | Submitted on: | | | | | | | | |
| | Address (number and street) Orlando, FL 32826 | 4/12/2021 15:25:11 (eastern) | | | | | | | | |
| | City, State, Zip Code | | | | | | | | | |
| | ☐ Check here if address has changed | (3) ID Number: 220 | | | | | | | | |
| (4) | Check appropriate box(es): | (0) | | | | | | | | |
| | ☐ Candidate Office Sought: School Board Dist. 1 ☐ 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) Report | Identifiers | | | | | | | | |
| Cove | er Period: From 2 / 1 / 2021 To | 2 / 28 / 2021 Report Type: M2 | | | | | | | | |
| | | ecial Election Report | | | | | | | | |
| (6) | Contributions This Report | (7) Expenditures This Report | | | | | | | | |
| Casl | n & Checks \$, , <u>250</u> . <u>00</u> | Monetary | | | | | | | | |
| Loar | | Transfers to Office Account \$, , , 0 . 00 | | | | | | | | |
| Tota | I Monetary \$, , <u>250</u> . <u>00</u> | Total Monetary \$. 10 . 30 | | | | | | | | |
| In-Ki | nd \$,, <u>0</u> . <u>00</u> | , , , | | | | | | | | |
| | | (8) Other Distributions \$, , 000_ | | | | | | | | |
| (9) | (9) TOTAL Monetary Contributions To Date \$\[\begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | | | | | | |
| (T | (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 | | | | | | | | | |
| X | | <u>X</u> | | | | | | | | |
| Si | gnature | Signature | | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name | Angie Gallo | | | | 2) I.D. Numbe | er | 220 |
|---------------------------|--|------------|--------------------------|----------------------|------------------------|-----------|---------|
| | 2/1/2021 | | 2 | /28/2021 | | 1 | 1 |
| (3) Cover Peri | od// | thro | ough | 11_ | (4) Pag | je | 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 |
| 2/27/2021 | Banko, Khanh-Lien 601 NW 23rd Street Gainesville, FL 32607 | | cfo | СН | | Add | \$250.0 |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name Ar | Angie Gallo | | | | | | | (2) I.D. Nun | nber | 220 | | | |
|---------------|-------------|-------|-----|----|---------|--------|------|--------------|----------|-----|----|---|--|
| | | 2/1/2 | 202 | 21 | | 2/28/2 | 2021 | | | | | | |
| (3) Cover Per | riod | 1 | | 1 | through | 1 | 1 | | (4) Page | 1 | of | 1 | |

| (5) | (7) | (8) | (9) | (10) | (11) |
|---------------------------|---|---|---------------------|-----------|---------|
| (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 |
| 2/28/2021 | Anedot, 5555 Hilton Ave Baton Rouge, LA 70808 | credit card processing fee | МО | Add | \$10.30 |
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