| CAMPAIGN TREASURER'S REPORT SUMMARY |                                                                                                                                                                                                                                                                                                                                                                  |                                             |  |  |  |  |  |  |  |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--|--|--|--|--|--|--|
| (1)                                 | Katherine M. Waldron                                                                                                                                                                                                                                                                                                                                             | OFFICE USE ONLY                             |  |  |  |  |  |  |  |
|                                     | Name                                                                                                                                                                                                                                                                                                                                                             | ONLINE SUBMISSION [1235825]                 |  |  |  |  |  |  |  |
| (2)                                 | 1215 Gator Trail                                                                                                                                                                                                                                                                                                                                                 | Submitted on:                               |  |  |  |  |  |  |  |
|                                     | Address (number and street) West Palm Beach, FL 33409                                                                                                                                                                                                                                                                                                            | 10/23/2020 09:27:47 (eastern)               |  |  |  |  |  |  |  |
|                                     | City, State, Zip Code                                                                                                                                                                                                                                                                                                                                            | <del></del>                                 |  |  |  |  |  |  |  |
|                                     | Check here if address has changed                                                                                                                                                                                                                                                                                                                                | (3) ID Number: 335                          |  |  |  |  |  |  |  |
| (4)                                 | Check appropriate box(es):                                                                                                                                                                                                                                                                                                                                       |                                             |  |  |  |  |  |  |  |
|                                     | <ul> <li>☐ Candidate Office Sought: Port of Palm Beach Group 2</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul> |                                             |  |  |  |  |  |  |  |
|                                     | (5) Report                                                                                                                                                                                                                                                                                                                                                       | Identifiers                                 |  |  |  |  |  |  |  |
| Cove                                | er Period: From 10 / 3 / 2020 To                                                                                                                                                                                                                                                                                                                                 | 10 / 16 / 2020 Report Type: <u>G5</u>       |  |  |  |  |  |  |  |
| X O                                 | riginal Amendment Spe                                                                                                                                                                                                                                                                                                                                            | ecial Election Report                       |  |  |  |  |  |  |  |
| (6)                                 | Contributions This Report                                                                                                                                                                                                                                                                                                                                        | (7) Expenditures This Report                |  |  |  |  |  |  |  |
| Casl                                | n & Checks \$ , , <u>500</u> . <u>00</u>                                                                                                                                                                                                                                                                                                                         | Monetary                                    |  |  |  |  |  |  |  |
| Loar                                |                                                                                                                                                                                                                                                                                                                                                                  | Transfers to Office Account \$ , , , 0 . 00 |  |  |  |  |  |  |  |
| Tota                                | I Monetary \$ , , <u>500</u> . <u>00</u>                                                                                                                                                                                                                                                                                                                         | Total Monetary \$ . 4 100 . 00              |  |  |  |  |  |  |  |
| In-Ki                               | ind \$,, <u>0</u> . <u>00</u>                                                                                                                                                                                                                                                                                                                                    | Total Monetary \$ ,4 , 100 . 00_            |  |  |  |  |  |  |  |
|                                     |                                                                                                                                                                                                                                                                                                                                                                  | (8) Other Distributions \$ , , 000_         |  |  |  |  |  |  |  |
| (9)                                 | (9) TOTAL Monetary Contributions To Date \$,50,35020                                                                                                                                                                                                                                                                                                             |                                             |  |  |  |  |  |  |  |
| (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<br>Si                             | gnature                                                                                                                                                                                                                                                                                                                                                          | X<br>Signature                              |  |  |  |  |  |  |  |

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name                       | Katherine M. Waldro                                          | n                          |                     | 2) I.D. Numb    | er <u> </u> | 335               |
|--------------------------------|--------------------------------------------------------------|----------------------------|---------------------|-----------------|-------------|-------------------|
| (3) Cover Perio                | 10/3/2020<br>od///                                           | through                    | 10/16/2020          | (4) Pa          | ge <u>1</u> | of                |
| (5)<br>Date<br>(6)<br>Sequence | (7) Full Name (Last, Suffix, First, Middle) Street Address & | (8)<br>Contributor         | (9)<br>Contribution | (10)<br>In-kind | (11)        | (12)              |
| Number                         | City, State, Zip Code<br>Khosa, Oneil I                      | Type Occupation I business | Type CH             | Description     | Amendment   | Amount<br>\$500.0 |
| 10/8/2020                      | 431 Fairway Drive<br>Deerfield, FL 33411                     | owner                      | CII                 |                 |             | \$300.0           |
| 1                              |                                                              |                            |                     |                 |             |                   |
| J 1                            |                                                              |                            |                     |                 |             |                   |
| 1 1                            |                                                              |                            |                     |                 |             |                   |
| J. 1                           |                                                              |                            |                     |                 |             |                   |
| 1 1                            |                                                              |                            |                     |                 |             |                   |
| 1 1                            |                                                              |                            |                     |                 |             |                   |
| 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    | Katherine | Μ.  | Waldro | on      |        |      | <br>(2) I.D. Nun | nber | 3  | 335 |  |
|-------------|-----------|-----|--------|---------|--------|------|------------------|------|----|-----|--|
|             | 10/       | 3/2 | 2020   |         | 10/16/ | 2020 |                  |      |    |     |  |
| (3) Cover P | eriod     | 1   | 1      | through | 1      | 1    | (4) Page         | 1    | of | 1   |  |

| (5)                       | (7)                                                                                     | (8)                                                                 | (9)                 | (10)      | (11)       |
|---------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------|-----------|------------|
| (6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount     |
| 10/9/2020                 | WALDRON, KATHERINE<br>Candidate to<br>1215 Gator Trail<br>WEST PALM BEACH, FL 33409     | loan repayment                                                      | RM                  |           | \$600.00   |
| 10/4/2020                 | WALDRON, KATHERINE<br>Candidate to<br>1215 Gator Trail<br>WEST PALM BEACH, FL 33409     | loan repayment                                                      | RM                  |           | \$3,500.00 |
| //                        |                                                                                         |                                                                     |                     |           |            |
| //                        |                                                                                         |                                                                     |                     |           |            |
| //                        |                                                                                         |                                                                     |                     |           |            |
| //                        |                                                                                         |                                                                     |                     |           |            |
| //                        |                                                                                         |                                                                     |                     |           |            |
| //                        |                                                                                         |                                                                     |                     |           |            |
| DS-DE 14 (Rev             | 4440 1                                                                                  |                                                                     |                     |           |            |