	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Roberta Cutting	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	38032 Postal Drive; Unit 603	Submitted on:						
	Address (number and street)	6/10/2019 17:06:54 (eastern)						
	Zephyrhills, FL 33539 City State Zin Code							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1116						
(4)	Check appropriate box(es):							
		uit Court & County Comptroller						
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
		☐ 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 5 / 1 / 2019 To							
		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$, , 000	Expenditures \$, , 3 . 00						
Loor	\$ 0.00	Townstown to						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Tota	al Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00						
lUta	1 Monetary	Total Monetary \$, , 3 . 00						
In-Ki	ind \$, , 0.00	,,,						
111-171	nd • , _ , _ ,	(8) Other Distributions						
		(8) Other Distributions \$, , <u>0</u> 00_						
		,,,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,, <u>55</u> . <u>00</u>	\$, , <u>37</u> . <u>00</u>						
	(41) 0							
	(11) Cert It is a first degree misdemeanor for any perso							
Lo	certify that I have examined this report and it is true, corre	• • • • • • •						
10	i sorary and rindro examined and report and it is true, correct, and complete.							
-	ype name)	(Type name)						
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Roberta Cutting				2) I.D. Numbe	er <u>1</u>	116
	5/1/2019	41.000		/31/2019		sove 1	• 0
(3) Cover Perio	od///	_ thro	ougn	<i>'</i>	(4) Pag	e <u> </u>	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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		1					

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Roberta	Cutti	ng				 (2) I.D. Num	ber	1	116	39
	5	/1/20	19		5/31/2	019					
(3) Cover P	eriod	1	1	through	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
5/31/2019	San Antonio Credit Union, 12542 Curley St. San Antonio, FL 33576	bank fee	МО		\$3.00
1	San Antonio, FL 33576				
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DS-DE 14 (Rev					