	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Jennie L. Sorrell	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	8428 Green St	Submitted on:					
	Address (number and street) Port Richey, FL 34668	3/22/2019 09:52:51 (eastern)					
	City, State, Zip Code	<del></del>					
	Check here if address has changed	(3) ID Number: 1133					
(4)	_	(6) 12 (44)1561.					
(4)	Check appropriate box(es):  Candidate Office Sought: Port Richey C	ouncil Member					
	☐ Candidate Office Sought: Port Richey C☐ Political Committee (PC)	Outlett Member					
	☐ 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 individual making electioneering communications)	Check here if no other IE or EC reports will be filed					
	(5) Report	Identifiers					
Cove	er Period: From $3 / 9 / 2019$ To	6 / 6 / 2019 Report Type: <u>TR-PR</u>					
X O	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	n & Checks \$,,,0 . 00	Monetary					
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , 0 . 00					
Tota	I Monetary \$ , , , 000	Total Monetary \$ , , 455 . 20					
In-Ki	nd \$ , , 0 . 00						
		(8) Other Distributions					
		\$ , , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, _50000	\$,,, 500 00_					
	(11) Cert It is a first degree misdemeanor for any pers						
١c	ertify that I have examined this report and it is true, corn						
	ype name)	(Type name)					
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	<u>Jennie L. Sorrell</u>				2) I.D. Numbe	r1	133
	3/9/2019		6	/6/2019			
(3) Cover Perio	od / /	throug	gh	1 1	(4) Pag	e <sup>1</sup>	of <sup>0</sup>
			00 0			2 1-	
(5)	(7)	(	(8)	(9)	(10)	(11)	(12)
Date	Full Name				<b>.</b> ,	19000 1900	
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Conti	ributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
01401 1996 06 1541 5450 1498 3450 1111	Constitution of the Consti			54-5 x G	An index or department of the control of the contro		360 (304 (30 (30 (30 (30 (30 (30 (30 (30 (30 (30
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J I							
1 1							
10 St							
7							
1 4							
1 1							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _	Jennie	L.	Sorr	ell				 (2) I.D. Nun	nber	1	L133	
		3/9	/2019	9		6/6/20	19	-				
(3) Cover P	eriod		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
3/22/2019	barnett, peter 8428 green st port richey, fl 34668	reimbursement of funds to close out acct.	MO		\$455.20
1	port front, if stood	crose out ucce.			
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DS-DE 14 (Rev.	11/13 )		,	A	<del>)</del>