CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Judith G. Allen	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1186162]							
(2)	5940 Grand Blvd	Submitted on:							
	Address (number and street) New Port Richey, FL 34652	3/26/2019 16:47:21 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 1142							
(4)	Check appropriate box(es):								
	(5) Report	Identifiers							
Cove	er Period: From 3 / 9 / 2019 To	3 / 22 / 2019 Report Type: <u>G2</u>							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	Cash & Checks \$,, _000 Monetary Expenditures \$,, _15 . 40								
Loar		Transfers to Office Account \$, , , 0 . 00							
	I Monetary \$,,	Total Monetary \$, , _15 . 40							
In-Ki	find \$								
		(8) Other Distributions \$, , 000_							
(9) TOTAL Monetary Contributions To Date \$, , 60 00 \$ \$, , , 64 47									
(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 Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)								
X Si	gnature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Judith G. Allen				2) I.D. Numbe	er <u>1</u>	142
(3) Cover Perio	3/9/2019 od///	thro	ough	/22/2019 //	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8) ontributor Occupation	(9)	(10)	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Alleidileit	Amount
1 1							
1 1							
j j							
J I							
1 1							
1 1							
J I							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Judith	G.	Alle	en.				 (2) I.D. Nun	nber]	1142	
		3/9	/201	9		3/22/2	2019					
(3) Cover P	eriod		1	1	through	1	1	(4) Page	1	of	1	

Date Full Name Purpose (add office sought if contribution to a Expenditure	(5)	(7)	(8)	(9)	(10)	(11)
New Port Richey, FL 34652`	(6) Sequence	(Last, Suffix, First, Middle) Street Address &	(add office sought if contribution to a	Expenditure Type	Amendment	Amount
	3/18/2019		gas	MO		\$15.40
	1	New Port Richey, FL 34652				
	_//					
	//					
	//					
	//					
	//					
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