CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Lorraine M. Kelly	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	***Protected***	Submitted on:							
	Address (number and street)	5/7/2018 12:01:18 (eastern)							
	City, State, Zip Code	<del></del>							
	Check here if address has changed	(3) ID Number: 956							
(4)		(b) 13 Humber.							
(+)	Check appropriate box(es):  Candidate Office Sought: County Judge	- Group 16							
	Political Committee (PC)								
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
	☐ Party Executive Committee (PTY) [ ☐ Independent Expenditure (IE) (also covers an [	<ul><li>☐ Check here if PTY has disbanded</li><li>☐ Check here if no other IE or EC reports will be filed</li></ul>							
	individual making electioneering communications)	Check here if no other in or no reports will be med							
(5) Report Identifiers									
Cove	er Period: From $4 / 1 / 2018$ To								
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$,6, _20000	Monetary Expenditures \$ ,5 , 520 . 80							
Loar	s , , , , 000	Transfers to Office Account \$ , , 0 . 00							
Tota	I Monetary \$ ,6 , <u>200</u> . <u>00</u>	Total Monetary \$ , 5 , 520 . 80							
In-Ki	nd \$ , , 0 . <u>00</u>								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$	\$, <u>5</u> , <u>520</u> . <u>80</u>							
(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:									
/Tv	(Type name) (Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		χ							
	gnature	Signature							

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

(1) Name	Lorraine M. Kelly	(2) I.D. Number						
	od//		4	1/30/2018				
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	5.00	(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount	
4/16/2018 /	Kelly, Lorraine M.  ***Protected***  *****, ** *****	S	county judge	СН			\$5,600.0	
4/16/2018 / /	<pre>Kelly, Lorraine M. ***Protected*** ****, ** *****</pre>	S	county judge	СН			\$600.0	
1 1								
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I I								
J I								
f 1								

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

(1) Name Lorr	aine M.	Kelly				(2) I.D. Nur	nber	!	956	
	4/1/2	018		4/30/2	018	~ ~ ~				
(3) Cover Period	I I	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
1	Pinellas County, Supervisor of Elections 13001 Starkey Rd. Largo, FL 33773	candidate qualifying fee	МО		\$5,520.80
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