CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Peggy 0'Shea	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1165202]						
(2) 120 Water Oak Way	Submitted on:						
Address (number and street) Oldsmar, FL 34677	8/3/2018 22:21:26 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 961						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>School Board Member - District 3 - At Large</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 							
(5) Report Identifiers							
Cover Period: From 7 / 21 / 2018 To	7 / <u>27</u> / <u>2018</u> Report Type: <u>P4</u>						
Image: Special Election Report							
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$,, 250 . 00	Monetary Expenditures \$, , <u>150</u> . <u>00</u>						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$						
Total Monetary \$	Total Monetary \$, , <u>150</u> . <u>00</u>						
	(8) Other Distributions \$,,000_						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>4</u> , <u>360</u> · <u>00</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:							
(Type name)	(Type name)						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Peggy 0'Shea		(2) I.D. Number						
7/21/2018			7/27/2018						
(3) Cover Peri	od / /	thre	ough	II	(4) Pag	e	_ of		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6)	(Last, Suffix, First, Middle)								
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount		
7/27/2018 / /	Aungst, Cary ***Protected***	I	physician	CH			\$250.00		
1									
1 1	-								
1 1	_								
1 1	_								
1 1	_								
1 1									
1 1						6			
1 1									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Pegg	CAMPAIGN TREASURER ' by 0'Shea		D EXPENDIT (2) I.D. Number		961
(3) Cover Period	7/21/2018 1// through	7/27/2018	(4) Page <u>1</u>	of	1
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
7/21/2018	Clearwater Chamber of Commerce, 600 Cleveland St., Suite 200 Clearwater, FL 33755	table sponsor	MO		\$150.00
_/ /					
_ / /					
11					
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11					
11					

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