CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Kerry Smith	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	8129 Virginia Ln	[1271793]								
	Address (number and street)	Submitted on: 7/28/2022 14:49:26 (eastern)								
	Milton, FL 32583	(7/20/2022 14:49:20 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:138								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: County Commissioner District 2 ☐ 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								
Cove	er Period: From 7 / 16 / 2022 To									
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casł	n & Checks \$,1 , 900 . 00	Monetary								
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$,1 , <u>900</u> . <u>00</u>	Total Monetary \$, , 36 . 85								
In-Ki	nd \$,,,000									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>22</u> , <u>176</u> . <u>00</u>	\$, <u>17</u> , <u>406</u> . <u>22</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)										
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		x								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	erry Smith				(2) I.D. Number		138	
	7/16/20	22		7/22/	2022				
(3) Cover Period	1	1	through	1	7	(4) Page	1	of	1

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/18/2022	Anesthesia, Timberland 2641 Wildhurst Trl Milton, FL 32571	В	anesthesia	CH	*		\$500.0
7/18/2022	Beckham, Denise 4680 Blueribbon Dr Milton, FL 32583	I	rn recruiter	СН			\$150.0
7/21/2022	Robinson, Scott 5866 Cherokee Rd Milton, FL 32570	I	retired	СН			\$1,000.0
7/21/2022	Pollard, Patricia 7271 Ranchers Cv Trl Milton, FL 32570	I	home maker	CH			\$250.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _K	erry	Smith					(2) I.D. Nu	mber	-	138	
		7/16/2	022		7/22/20	022	~ ~ ~				
(3) Cover Pe	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
7/21/2022	Stripe, 5866 Cherokee Rd Milton, FL 32570	stripe - robinson	MO		\$29.30
7/19/2022	Stripe, 7271 Ranchers Cv Trl Milton, FL 32570	stripe fee patricia pollard	MO		\$7.55
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