

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kathie Shepard  
 Name

(2) 204 S. Massachusetts  
 Address (number and street)

DeLand, FL 32724  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1175545]

Submitted on:  
 10/11/2018 11:28:30 (eastern)

Check here if address has changed

(3) ID Number: 525

(4) Check appropriate box(es):

- Candidate Office Sought: West Volusia Hospital Authority - Group B, Seat 2
- Political Committee (PC)
- 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

Cover Period: From 9 / 29 / 2018 To 10 / 5 / 2018 Report Type: G4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 110 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 110 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 100 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 100 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,      , 940 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      , 464 . 90

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Kathie Shepard (2) I.D. Number 525  
 (3) Cover Period 9/29/2018 through 10/5/2018 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10/1/2018 / /	Ragonese, Grace 207 Wellisford Deland, fl 32724	I	retired	CA			\$10.00
1							
10/1/2018 / /	Coen, Jennifer 2255 River Ridge Road Deland, Fl 327	I	ballet teacher	CH			\$100.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Kathie Shepard

(2) I.D. Number 525

(3) Cover Period 9/29/2018 through 10/5/2018

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
10/5/2018 / /	NAACP, Meet & Greet 801 S Alabama Ave Deland , Fl 32724	candidate forum entrance fee	MO		\$100.00
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					