

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alisa &#34;Lisa&#34; Stafford  
 Name

(2) 461 Clark St  
 Address (number and street)

Orange City, FL 32763  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1267921]

Submitted on:  
 7/7/2022 19:08:44 (eastern)

Check here if address has changed (3) ID Number: 903

(4) Check appropriate box(es):

Candidate Office Sought: Orange City Council District 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 6 / 18 / 2022 To 7 / 1 / 2022 Report Type: P2

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,      , 100 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 100 . 00

In-Kind \$      ,      , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      , 28 . 65

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 28 . 65

**(8) Other Distributions**  
 \$      ,      , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,      , 250 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,      , 147 . 24

### (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 Alisa &#34;Lisa&#34; Stafford (2) I.D. Number 903

6/18/2022 through 7/1/2022

(3) Cover Period         /        /         through         /        /         (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
6/28/2022 / /	holmes, keith 217 West Hubbard AVE DeLand, FL 32720	I	retired	CA			\$100.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Alisa &#34;Lisa&#34; Stafford

(2) I.D. Number 903

(3) Cover Period 6/18/2022 through 7/1/2022

(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					
6/21/2022 / /	Mainstreet Community Bank, Volusia Ave Orange City, FL 32720	chk order harland clarke company	MO		\$28.65
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