	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Justin Kennedy	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	1005 Fernald Street	Submitted on:					
	Address (number and street)	8/12/2022 23:19:17 (eastern)					
	Edgewater, FL 32132  City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 816					
(4)		(3) ID Nulliber.					
(4)	Check appropriate box(es):	Mambau Distuist 2					
	<ul><li>☐ Candidate Office Sought: School Board</li><li>☐ Political Committee (PC)</li></ul>	Member, District 3					
	☐ 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					
Cove	er Period: From $\frac{7}{2}$ / $\frac{30}{2022}$ To	8 / 5 / 2022 Report Type: P6					
X O	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cook	o s Charles \$ 0 00	Monetary Expenditures \$ , , 500 . 00					
Casi	n & Checks \$ , , , 0 . 00	Expenditures \$ , , <u>500</u> . <u>00</u>					
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to					
	Φ 0.00	Office Account \$ , , , 0 . 00					
Tota	I Monetary \$ , , 0 . 00	Total Monetary \$ . 500.00					
I . 12:	and \$ , , 0.00	Total Monetary \$ , , <u>500</u> . <u>00</u>					
In-Ki	and \$,,,000	(O) Other Dietributions					
		(8) Other Distributions \$ , 000					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(-)	\$	\$, _15, _88957_					
	·,	,,,,					
	(11) Cert						
	It is a first degree misdemeanor for any pers	, , ,					
I certify that I have examined this report and it is true, correct, and complete:							
_(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		Χ					
	gnature	Signature					

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

(1) Name	Justin Kennedy				2) I.D. Numbe	er <u>8</u>	16	
	7/30/2022		8	/5/2022				
(3) Cover Perio	od//	thro	ough	11_	(4) Pag	e	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	Amount	
Number	Oity, State, Zip Gode	Турс	Оссирации	Турс	Description		Amount	
1 1								
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1 1								
DS-DE 13 (Rev. 11/13	SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							

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

(1) Name	Justin	Kenned	ly				 (2) I.D. Nun	nber	8	316	
		7/30/2	022		8/5/202	22	-	-			
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5) Date	(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
7/30/2022	Hometown News, PO Box 850 Fort Pierce, FL 34954	digital media	MO		\$500.00
1	FOIL PIEICE, FL 34934				
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DS-DE 14 (Rev					