CAMPAIGN TREASURER'S REPORT SUMMARY						
(1)	Kelly Frasca	OFFICE USE ONLY				
	Name	ONLINE SUBMISSION [1299265]				
(2)	616 John Street	Submitted on:				
	Address (number and street)	9/5/2023 13:48:23 (eastern)				
	Lake Helen, FL 32744					
	City, State, Zip Code	(2) ID New Ivers				
	Check here if address has changed	(3) ID Number: 945				
(4)	Check appropriate box(es):					
	Candidate Office Sought: Lake Helen M	ayor				
	☐ 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	☐ Check here if no other IE or EC reports will be filed				
	individual making electioneering communications)					
	(5) Report	rt Identifiers				
Cove	er Period: From $\underline{6}$ / $\underline{1}$ / $\underline{2023}$ To	0 6 / 16 / 2023 Report Type: P1				
□ 0	riginal 🖾 Amendment 🔲 Sp	pecial Election Report				
(6)	Contributions This Report	(7) Expenditures This Report				
Cash	n & Checks \$, , , 000	Monetary				
Loar	s \$,, <u>0</u> .00	Transfers to Office Account \$, , 0 . 00				
Tota	I Monetary \$,,	Total Monetary \$, , 50				
In-Ki	nd \$, , 0 . <u>00</u>					
		(8) Other Distributions				
		\$, , <u>0</u> . <u>00</u>				
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
	\$, _ 1 , _24599	\$, <u>1</u> , <u>180</u> . <u>34</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:						
/T\	(Type name) (Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)				
X	x x					
	gnature	Signature				

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Kelly Frasca		(2) I.D. Number 945				
	6/1/2023		6	/16/2023			
(3) Cover Per	riod / /	thro	ough	11_	(4) Page	• <u>1</u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Cç	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name <u>Kel</u>	ly Frasca		(2) I.D. Number	945	
	6/1/2023	6/16/2023			
(3) Cover Perio	od / /	through / /	(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
6/14/2023	Supervisor of Election, 1750 S. Woodland Blvd. Deland, FL 32720	petition fee	МО	Delete	\$0.20
6/14/2023	Supervisor of Election, 1750 S. Woodland Blvd. Deland, FL 32720	petition fee	MO	Add	\$0.00
6/14/2023	Supervisor of Election, 1750 S. Woodland Blvd. Deland, FL 32720	petition fee	МО	Delete	\$0.20
3 6/14/2023 4	Supervisor of Election, 1750 S. Woodland Blvd. Deland, FL 32720	petition fee	МО	Add	\$0.00
6/14/2023	Supervisor of Election, 1750 S. Woodland Blvd. Deland, FL 32720	petition fee	МО	Delete	\$0.10
6/14/2023	Supervisor of Election, 1750 S. Woodland Blvd. Deland, FL 32720	petition fee	МО	Add	\$0.00
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	4440.)				