

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kate Bellamy

Name

(2) 1306 Robie Avenue

Address (number and street)
MOUNT DORA, FL, 32757

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____



(4) Check appropriate box(es):

Candidate Office Sought: Mount Dora City at large

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 08 / 04 / 2018 To 08 / 23 / 201 Report Type: P7

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 895. 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , 895. 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 375. 00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 375. 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 1, 295 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 725 . 32

(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) Katherine Bellamy

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

(Type name) Katherine Bellamy

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name KATHERINE DELEON

(2) I.D. Number _____

(3) Cover Period 8/4/18 through 8/23/18

(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					
8/22/18	MOUNT DORA TRANSIT 400 W 4th AVE MOUNT DORA FL 32757	SHUTTLE SPACE FLOWING FOR SIGN	Char		375.00
1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name KATHLEEN BELAMY (2) I.D. Number _____

(3) Cover Period 8/14/18 through 8/23/18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
8/16/18	JUDI JAMES 3826 CACTUS LN MOUND DORA FL 32757	I	R	CAS	DONATION VIA CAMPAIGN AUCTIONS		\$90
1							
8/16/18	JOHN TUCKER 1926 OVERWOOD DR MT DORA FL 32757	I	R	CHE	DONATION VIA CAMPAIGN AUCTIONS		\$55
2							
8/16/18	PEROMY TELLIN 229 ECH AVE MT DORA FL 32757	I	R	CHE	DONATION VIA CAMPAIGN AUCTIONS		\$450
3							
8/16/18	PHIL BARBER 1306 ROBIE AVE MOUND DORA FL 32757	I	BUS OWNER	CAS	DONATION VIA CAMPAIGN AUCTIONS		\$100
4							
8/17/18	KATE BELAMY 1306 ROBIE AVE MOUND DORA FL 32757	S	BUS OWNER	CAS	LOAN TO ASSET		\$200
5							
1/1							
1/1							