

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Allyson E. Berry
Name

(2) P.O. Box 492622
Address (number and street)

Leesburg, FL 34749
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Candidate | Office Sought: <u>Leesburg City Commission District 1</u> | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY) | | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | | |

(5) Report Identifiers

Cover Period: From 10 / 8 / 22 To 10 / 21 / 22 Report Type: _____

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 3 , 035 . 00

Loans \$, , .

Total Monetary \$, , .

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , 545 . 30

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 18 , 126 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 5 , 067 . 64

(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) Vonda R. Parker

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

X [Signature]
Signature

(Type name) Allyson E. Berry

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature