

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Deborah Gillis
 Name _____
 (2) 82150 Overseas Hwy
 Address (number and street)
 Islamorada, FL 33036
 City, State, Zip Code _____

OFFICE USE ONLY					
Deb Gillis <debgillis@att.net> To: Marie McGrath <small>See instructions for filing this document in electronic format. This document is intended for electronic filing.</small>					
<input type="button" value="Reply"/> <input type="button" value="Reply All"/> <input type="button" value="Forward"/> <input type="button" value="Print"/> <input type="button" value="Close"/>	Sun 10/13/2024 5:00 AM				

(3) ID Number: _____

(4) Check appropriate box(es): **Village Council seat 3**

Candidate Office Sought: _____

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

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

(5) Report Identifiers

Cover Period: From 10 / 05 / 2024 To 10 / 11 / 2024 Report Type: 24G5

Original Amendment Special Election Report

<p>(6) Contributions This Report</p> <p>Cash & Checks \$ <u> , , 500.00</u></p> <p>Loans \$ <u> , , 5000.00</u></p> <p>Total Monetary \$ <u> , , .</u></p> <p>In-Kind \$ <u> , , .</u></p>	<p>(7) Expenditures This Report</p> <p>Monetary Expenditures \$ <u> , , 1510.12</u></p> <p>Transfers to Office Account \$ <u> , , .</u></p> <p>Total Monetary \$ <u> , , .</u></p>
<p>(9) TOTAL Monetary Contributions To Date</p> <p>\$ <u> , , 26,400.00</u></p>	<p>(10) TOTAL Monetary Expenditures To Date</p> <p>\$ <u> , , 17589.31</u></p>

(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) **Deborah Gillis**
 Individual (only for IE) Treasurer Deputy Treasurer
 or electioneering comm.)
X 
 Signature

(Type name) **Deborah Gillis**
 Candidate Chairperson (only for PC and PTY)
X 
 Signature

CAMPAIN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Deborah Gillis

(2) I.D. Number _____

(3) Cover Period 10 / 05 / 2024 **through** 10 / 11 / 2024

(4) Page 1 of 1

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Debrah Gillis (2) I.D. Number _____

(3) Cover Period 10 / 05 / 2024 through 10 / 11 / 2024 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)
(6) Sequence Number	Street Address & City, State, Zip Code	Contributor Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
10 7 2024 / /	Deborah Gillis 82150 Overseas Hwy Islamorada, Fl 33036	I	MOTEL OWNER	LOA			\$5000.00
1		B	RESORT	CHE			\$500.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							