

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Deborah Gillis

Name

(2) 82150 Overseas Hwy

Address (number and street)

Islamorada, FL 33036

City, State, Zip Code

☐ Check here if address has changed

OFFICE USE ONLY

2022-09-01 P02:42

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Village Council seat 4

☐ 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 8 / 1 /2022 To 8 /31 /2022 Report Type: 2022M8

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , 2,000 . 00

Total Monetary \$ _____ , 2,000 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 480 . 00

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

Total Monetary \$ _____ , _____ , 480 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2,000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 480 . 00

(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 or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Deborah Gillis

Signature

(Type name) Deborah Gillis

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Deborah Gillis

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 8 / 1 / 2022 through 8 / 31 / 2022
(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11)	(12)
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
08 / 09 / 2022 1	Deborah Gillis 82150 Overseas Hwy Islamorada, Fl 33036	I	motel owner	LOA			\$2,000.00
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Deborah Gillis

(2) I.D. Number _____

(3) Cover Period 8 / 1 / 2022 through 8 / 31 / 2022

(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 / 9 / 22	Islamorada, Village of Islands 86800 Overseas Hwy Islamorada, Fl 33036	qualification fees			
1			CAN		\$480.00
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