

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Deborah P. Kynes  
 Name  
 (2) 360 Monroe Street  
 Address (number and street)  
Dunedin, FL 34698  
 City, State, Zip Code

OFFICE USE ONLY  
 RECEIVED  
**OCT 26 2018**  
 OFFICE OF THE CITY CLERK

Check here if address has changed

(3) ID Number: 106799977

(4) Check appropriate box(es):

- Candidate Office Sought: Dunedin City Commission, Seat 2
- 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 individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 10 / 13 / 2018 To 10 / 19 / 2018 Report Type: G6-18

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0.00

Loans \$        ,        , 0.00

Total Monetary \$        ,        , 0.00

In-Kind \$        ,        , 0.00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0.00

Transfers to Office Account \$        ,        , 0.00

Total Monetary \$        ,        , 0.00

### (8) Other Distributions

\$        ,        , 0.00

### (9) TOTAL Monetary Contributions To Date

\$        , 14 , 458.47

### (10) TOTAL Monetary Expenditures To Date

\$        , 14 , 242.51

### (11) Certification

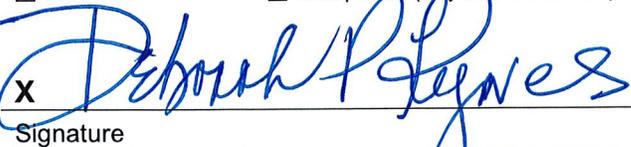
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) John F. Freeborn  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

**X**   
 Signature

(Type name) Deborah P. Kynes  
 Candidate  Chairperson (only for PC and PTY)

**X**   
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** Deborah P. Kynes **(2) I.D. Number** 106799977  
**(3) Cover Period** 10 / 13 / 2018 through 10 / 19 / 2018 **(4) Page** 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /	NONE						
1							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Deborah P. Kynes

(2) I.D. Number 106799977

(3) Cover Period 10 / 13 / 2018 through 10 / ~~19~~ / 2018

(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					
/ /	NONE				
1					
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