

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christopher M. Williams
 Name
 (2) 889 Virginia Street
 Address (number and street)
Dunedin, FL 34698
 City, State, Zip Code

OFFICE USE ONLY
 RECEIVED
MAR 09 2020
 OFFICE OF THE CITY CLERK

Check here if address has changed

(3) ID Number: 127257568

(4) Check appropriate box(es):

- Candidate Office Sought: Dunedin City Commission, Seat 3
- 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 2 / 1 / 2020 To 2 / 29 / 2020 Report Type: M-2-20

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , 15.00

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 15.00

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 15.00

(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) Sara McKendry-Williams
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Sara McKendry-Williams
 Signature

(Type name) Christopher M. Williams
 Candidate Chairperson (only for PC and PTY)

X Christopher M. Williams
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Christopher M. Williams

(2) I.D. Number 127257568

(3) Cover Period 2 / 1 / 20 through 2 / 29 / 20

(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
(6) Sequence Number		Type	Occupation	Type	Description		
2, 5, 20	Williams, Christopher 889 Virginia St Dresden, FL 34688	S		COA			\$15.00
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Christopher M. Williams

(2) I.D. Number 127257568

(3) Cover Period 2/1/20 through 2/29/20

(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					
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