

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kim Devine  
Name

(2) 251 W. Ratta Esplanade  
Address (number and street)

Punta Gorda, FL 33950  
City, State, Zip Code

**OFFICE USE ONLY**

06-27-14P02:17 RCVD

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: City Council District 1
- 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 6 / 1 / 14 To 6 / 20 / 17 Report Type: PI

- Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ 134.00, \_\_\_\_, \_\_\_\_

Loans \$ \_\_\_\_, \_\_\_\_, \_\_\_\_

Total Monetary \$ \_\_\_\_, \_\_\_\_, \_\_\_\_

In-Kind \$ ~~53.50~~, \_\_\_\_, \_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ 134.00, \_\_\_\_, \_\_\_\_

Transfers to Office Account \$ \_\_\_\_, \_\_\_\_, \_\_\_\_

Total Monetary \$ 134.00, \_\_\_\_, \_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_, \_\_\_\_, \_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ 134.00, \_\_\_\_, \_\_\_\_

### (10) TOTAL Monetary Expenditures To Date

\$ 134.00, \_\_\_\_, \_\_\_\_

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

X Steve Devine  
Signature

(Type name) Kim Devine  
 Candidate  Chairperson (only for PC and PTY)

X Kim Devine  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Kim Devine (2) I.D. Number \_\_\_\_\_

(3) Cover Period 6 / 1 / 14 through 6 / 30 / 14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
6 / 13 / 14	Kim Devine			S			100.00
1							
6 / 17 / 14	Kim Devine			S			34.00
2							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Kim Devine (2) I.D. Number \_\_\_\_\_

(3) Cover Period 6/1/14 through 6/30/14 (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					
6/19/14	Kim Devine	City Council District 1	CAN		\$80.50
1					
6/17/14	Kim Devine	City Council District 1	CAN		\$53.50
2					
///					
///					
///					
///					
///					
///					