

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Rachel B Keesling
 Name
 (2) 850 Bimini Lane
 Address (number and street)
Punta Gorda, FL 33950
 City, State, Zip Code

OFFICE USE ONLY

06-03-16P 02:59 RCVD

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es): Punta Gorda City Council District 2

Candidate Office Sought: _____
 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 06/01/2016 / ____ / ____ To 06/24/2016 / ____ / ____ Report Type: p1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 600.00 , ____ , ____ . ____

Loans \$ 00 , ____ , ____ . ____

Total Monetary \$ 600.00 , ____ . ____

In-Kind \$ 00 , ____ , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ ____ , ____ , ____ . ____

Transfers to Office Account \$ 00 , ____ , ____ . ____

Total Monetary \$ 00 , ____ , ____ . ____

(8) Other Distributions

\$ 00 , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 600.00 , ____ , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 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:

Rachel B Keesling
 (Type name)

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

X Rachel B Keesling
 Signature

Rachel B Keesling
 (Type name)

Candidate Chairperson (only for PC and PTY)

X Rachel B. Keesling
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

Rachel B. Keesling

(1) Name _____

(2) I.D. Number _____

(3) Cover Period 06/01/2016 / / through 06/24/2016 / /

(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							
06/06/2016 / / 1	Rachel B Keesling 850 Bimini Lane Punta Gorda, FL 33950	s	self	check			600.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Rachel B Keesling

(2) I.D. Number _____

(3) Cover Period 06/01/2016 / _____ / _____ through 06/24/2016 / _____ / _____

(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
/ /	no activity				
/ /					
/ /					
/ /					
/ /					
/ /					