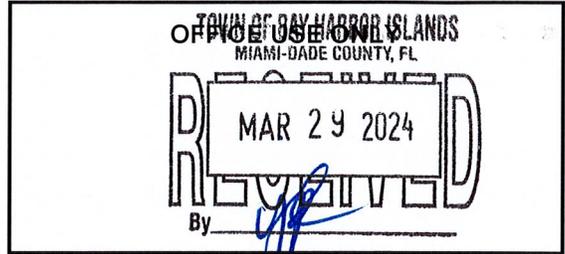


## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kathleen Kennedy  
 Name  
 (2) 9180 W. Bay Harbor Dr.  
 Address (number and street)  
Bay Harbor Islands, FL 33160  
 City, State, Zip Code



Check here if address has changed

(3) ID Number: # 91

(4) Check appropriate box(es):  
 Candidate Office Sought: Bay Harbor Islands Member  
 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 03 / 11 / 24 To 03 / 17 / 24 Report Type: G 6  
 Original  Amendment  Special Election Report

(6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

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

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

In-Kind \$ \_\_\_\_\_ , 100 , \_\_\_\_\_ . 00

(7) Expenditures This Report

Monetary Expenditures \$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Transfers to Office Account \$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

(8) Other Distributions  
 \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date  
 \$ \_\_\_\_\_ , \_\_\_\_\_ , 1975.00

(10) TOTAL Monetary Expenditures To Date  
 \$ 0 , \_\_\_\_\_ , 285.66

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

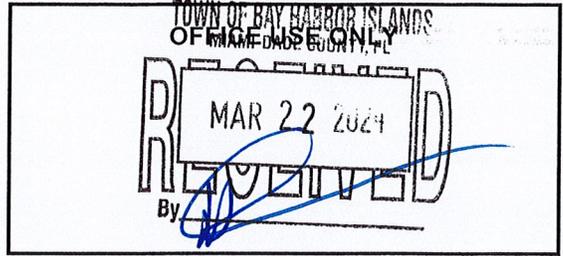
X Kathleen Kennedy  
 Signature

(Type name) Kathleen Kennedy  
 Candidate  Chairperson (only for PC and PTY)

X Kathleen Kennedy  
 Signature

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kathleen Kennedy  
 Name  
 (2) 9180 W. Bay Harbor Dr.  
 Address (number and street)  
Bay Harbor Islands, FL  
 City, State, Zip Code



Check here if address has changed

(3) ID Number: # 91

(4) Check appropriate box(es):

- Candidate Office Sought: Bay Harbor Council Member
- 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 03 / 11 / 24 To 03 / 17 / 24 Report Type: GS

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

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

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

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 00

### (7) Expenditures This Report

Monetary Expenditures \$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Transfers to Office Account \$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

\$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 1975 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 285.65

### (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) Kathleen Kennedy

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

X Kathleen Kennedy  
 Signature

(Type name) Kathleen Kennedy

Candidate  Chairperson (only for PC and PTY)

X Kathleen Kennedy  
 Signature

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

(1) Name Dan Kennedy (2) I.D. Number #91

(3) Cover Period 03 / 11 / 24 through 03 / 17 / 24 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
03 / 11 / 24	Frances Newhart 1060 Lane Concord	B	Retired Ink		Office		100.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Lal L Kennedy (2) I.D. Number #91

(3) Cover Period 03 / 11 / 24 through 03 / 17 / 24 (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		
/ /	<i>No expenditures</i>						
/ /							
/ /							
/ /							
/ /							