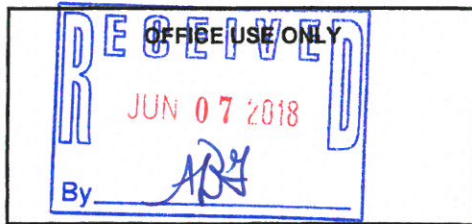


## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kristine A. Judeikis  
 Name  
 (2) 3700 Southwest 39th Street  
 Address (number and street)  
West Park, Florida 33023  
 City, State, Zip Code



Check here if address has changed

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

(4) Check appropriate box(es):

- Candidate Office Sought: West Park City Commission - Seat 2
- 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 05 / 01 / 18 To 05 / 31 / 18 Report Type: M5

Original  Amendment  Special Election Report

(6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 245.00

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 245.00

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

(7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 10.00

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 10.00

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

(9) TOTAL Monetary Contributions To Date  
 \$ \_\_\_\_\_ , \_\_\_\_\_ , 245.00

(10) TOTAL Monetary Expenditures To Date  
 \$ \_\_\_\_\_ , \_\_\_\_\_ , 10.00

### (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) Carolyn M. Hardy

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

(Type name) Kristine A. Judeikis

Candidate  Chairperson (only for PC and PTY)

X [Signature]  
 Signature

X [Signature]  
 Signature

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Kristine A. Judeikis (2) I.D. Number M-5

(3) Cover Period 05 / 01 / 18 through 05 / 31 / 18 (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	Amendment	Amount
05, 24, 18  1	Edge, Annette 5724 SW 38 St West Park, FL 33023	I		CAS			20. <sup>00</sup>
05, 24, 18  2	Tucci, John 3700 SW 39 St West Park, FL 33023	I		CAS			25. <sup>00</sup>
05, 24, 18  3	Edge, Jerry 3420 SW 32 Ct West Park, FL 33023	I		CAS			20. <sup>00</sup>
05, 24, 18  4	Queely-Doyd, Feybles 3720 SW 32 <sup>nd</sup> Ave West Park, FL 33023	I		CK			30. <sup>00</sup>
05, 24, 18  5	Carter, Jane 4201 SW 33 <sup>rd</sup> Drive West Park, FL 33023	I		CAS			20. <sup>00</sup>
05, 12, 18  6	Judeikis, Kristine 3320 SW 40 <sup>th</sup> Ave West Park, FL 33023	I		CK			100. <sup>00</sup>
1 1							

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

(1) Name Kristine A. Judeikis

(2) I.D. Number M-5

(3) Cover Period 05,01,18 through 05,31,18

(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					
5/31/18	Wells Fargo Bank NA PO Box 6995 Portland, OR 97228-6995	Bank Service Fee	CAN	ADD	10.00
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