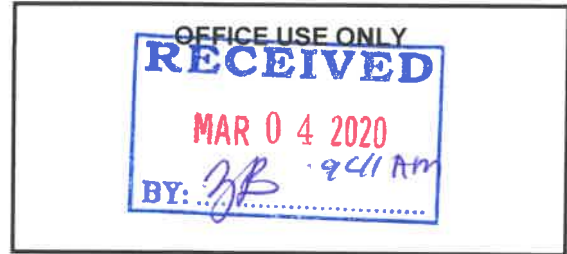


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JohnPaul O'Connor
 Name _____
 (2) 15914 Rain Lilly Way
 Address (number and street)
 Westlake, FL , 33470
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es): City Council Seat #3
 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 02 / 01 / 2020 To 02 / 28 / 2020 Report Type: G1
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____
 Loans \$ _____ , _____ , _____ . _____
 Total Monetary \$ _____ , _____ , _____ . _____
 In-Kind \$ _____ , _____ , 156 . 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
 \$ _____ , _____ , 120 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , _____ , 120 . 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:

KAILEY BOSS
 (Type name)
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Kailey Boss
 Signature

JOHNPAL O'CONNOR
 (Type name)
 Candidate Chairperson (only for PC and PTY)

X John Paul O'Connor
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JOHNPAUL O'CONNOR

(2) I.D. Number _____

(3) Cover Period 02 / 02 / 2020 through 02 / 28 / 2020

(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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/ /					
/ /					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JohnPaul O'Connor (2) I.D. Number _____

(3) Cover Period 02 / 02 / 2020 through 02 / 28 / 2020 (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
2 25 2020 / /	JohnPaul O'Connor 15914 Rain Lilly way Westlake, FL 33470	s	IT CONSULT	INK	WIX.COM HOST	N/A	\$156.00
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