

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Arthur Ray Kerr

Name

(2) 583 Johns Pass Avenue

Address (number and street)

Madeira Beach, FL 33708

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

MAR 11 '22 2:24PM

CITY CLERK

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner, District 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 02 / 26 / 2022 To 03 / 04 / 2022 Report Type: G3-22

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , 000 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , 000 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 307 . 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) Arthur Ray Kerr

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

X 

Signature

(Type name) Arthur Ray Kerr

Candidate Chairperson (only for PC and PTY)

X 

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ARTHUR RAY KERR (2) I.D. Number _____

(3) Cover Period 02 / 26 / 2022 through 03 / 04 / 2022 (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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ARTHUR RAY KERR

(2) I.D. Number _____

(3) Cover Period 02 / 26 / 2022 through 03 / 04 / 2022

(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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