

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) SHARON MAHONEY  
Name

(2) 174 OCALA DRIVE  
Address (number and street)

TAVERNIER, FLORIDA 33070  
City, State, Zip Code

☐ Check here if address has changed

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

(4) Check appropriate box(es):

☒ Candidate Office Sought: Village Council SEAT 5

☐ 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 8 / 01 / 22 To 8 / 31 / 22 Report Type: M8

☐ Original

☐ Amendment

☐ Special Election Report

## (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 375.00

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 375.00

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

## (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 120.00

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 120.00

## (8) Other Distributions

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

## (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 375.00

## (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:

(Type name) SHARON MAHONEY  
☐ Individual (only for IE or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer

X Sharon Mahoney  
Signature

(Type name) SHARON MAHONEY  
☒ Candidate ☐ Chairperson (only for PC and PTY)

X Sharon Mahoney  
Signature

# CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name SHARON maitney (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 8 / 1 / 2022 through 8 / 31 / 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
(6) Sequence Number		Type	Occupation				
8 / 9 / 2022	Debby DEgrove 1805 HUNTER Creek Drive PUNTA GOTA	1	X Ray TECH ESTHER	check			\$ 375.00
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# CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SHARON MAHONEY (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 08/01/2022 through 08/31/2022 (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
8/19/2022 1489	Village of Islamorada	Filing Fee	CAN		\$120.00
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