

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sunshine Linda-Marie Grund
 Name
 (2) 8577 Bradley's Landing St
 Address (number and street)
Orlando, FL 32827
 City, State, Zip Code

OFFICE USE ONLY

ORL CITY CLERK

OCT 13 2015 AM 10:26

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: Orlando Mayor
 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 09 / 01 / 15 To 09 / 30 / 15 Report Type: M9
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 3 , 496 . 13

Loans \$, , .

Total Monetary \$, 3 , 496 . 13

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, 3 , 479 . 13

Transfers to Office Account \$ 0 , , .

Total Monetary \$, , .

(8) Other Distributions
 \$, , .

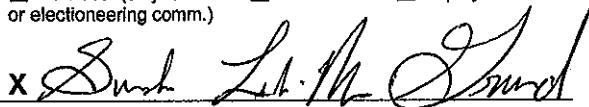
(9) TOTAL Monetary Contributions To Date
 \$, 3 , 496 . 13


(10) TOTAL Monetary Expenditures To Date
 \$, 3 , 479 . 13

(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) Sunshine Linda-Marie Grund
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

 Signature

(Type name) Sunshine Linda-Marie Grund
 Candidate Chairperson (only for PC and PTY)

 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sunshine Linda-Marie Grund

(2) I.D. Number _____

(3) Cover Period 09 / 01 / 2015 through 09 / 30 / 2015

(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					
09 / 04 / 2015	City of Orlando 400 S. Orange Ave. Orlando, FL 32801	Qualification Fee	MON		\$3,479.13
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Sunshine Linda-Marie Grund (2) I.D. Number _____
 (3) Cover Period 09 / 01 / 2015 through 09 / 30 / 2015 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
09 / 03 / 2015	01	Sunshine Grund 8577 Bradley's Landing St. Orlando, FL 32827	S	Educator	CHE			\$3,496.13
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