

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lucy Krombholz
Name

(2) 1402 NW 82nd Ave Apt 504
Address (number and street)

MARSHALL AL 33063
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City Commissioner Seat 3
- 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 01/01/22 To 01/31/22 Report Type: 2022-M1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, _____ 0

Loans \$ _____, _____, _____ 0

Total Monetary \$ _____, _____, _____ 0

In-Kind \$ _____, _____, _____ 0

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 53.00

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 53.00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 1,704.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 85.75

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

M. Lester
Signature

(Type name) LUCY KROMBHOLZ
 Candidate Chairperson (only for PC and PTY)

Lucy Krombholz
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

MARGATE

(1) Name Lucy Kromholz

(2) I.D. Number FEB 09 2022

(3) Cover Period 01/10/22 through 01/31/22

(4) Page 1 of 1

QUALIFYING OFFICES

(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				
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MARGATE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lucy Klombholz

(2) I.D. Number _____

(3) Cover Period 01/01/22 through 01/31/22

(4) Page _____ of FEB 09 2022

QUALIFYING OFFICES

(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
01/31/22 1	T.D. BANK 490 Noreen Sq Rd 7 MARGATE FL. 33063	Bank Svc Charge	Ord		3.00
1/26/22 2	Richard C Jirschel 1402 NW 80 Ave. Apt. 302 Margate FL 33063	Campaign Reimburse- MENT	RMB		50.00
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