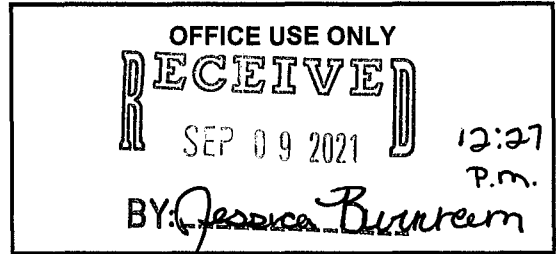


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Nathaniel Walker
 Name
 (2) 1312 Jackson Ave.
 Address (number and street)
Mount Dora, FL, 32757
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City council seat #5

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 08 / 09 2021 To 08 / 31 2021 Report Type: M12021

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 65 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 61 . 10

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 65 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 61 . 10

(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) Bobby Rowe

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

X Bobby Rowe
 Signature

(Type name) Nathaniel Walker

Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Nathaniel Walker

(2) I.D. Number _____

(3) Cover Period 08 / 09 / 2021 through 08 / 31 / 2021

(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					
8 / 12 / 2021	City of Mount Dora N. Baker St. Mount Dora, FL 32757		CAN		\$61.10
M1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

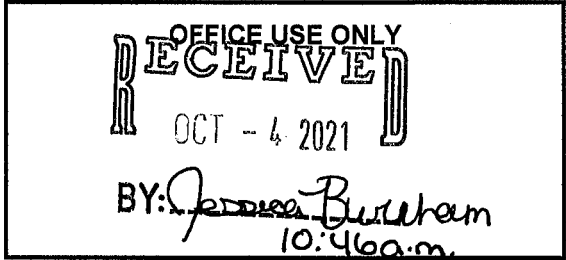
CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Nathaniel Walker (2) I.D. Number _____

(3) Cover Period 08 / 09 / 2021 through 08 / 31 / 2021 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
8 12 2021 / /	Nathaniel Walker 1213 Jackson Ave. Mount Dora, FL 32757	S	Tech	CHE			\$65.00
M1-1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT SUMMARY



(1) Nathaniel Walker
 Name
 (2) 1213 Jackson Ave.
 Address (number and street)
Mount Dora, FL 32757
 City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City Council Seat #5
- 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 9 / 1 / 21 To 10 / 1 / 21 Report Type: TR

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 00 . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 3 90 . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions
 \$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date
 \$ _____ , _____ , 65 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , _____ , 65 . 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) Bobby Rowe
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Bobby Rowe
 Signature

(Type name) Nathaniel Walker
 Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Nathaniel Walker

(2) I.D. Number _____

(3) Cover Period 9 / 1 / 21 through 10 / 1 / 21

(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					
9 / 21 / TR-1	Get Connected Stay Connected PO Box 421 Mount Dora, FL 32756		DIS		\$3.90
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Nathaniel Walker (2) I.D. Number _____

(3) Cover Period 9 / 1 / 21 through 10 / 1 / 21 (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
/ /	N/A						N/A
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							