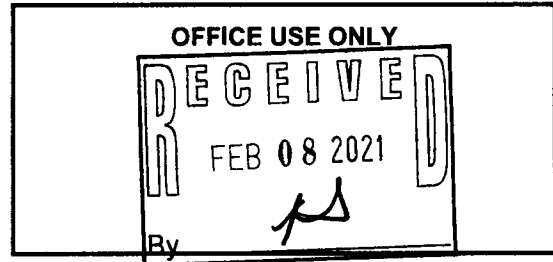


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Heather Norton
 Name
 (2) 2105 Bow Lane
 Address (number and street)
Safety Harbor, FL 34695
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: Safety Harbor City Commission, Seat 1
 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 2 / 1 / 21 To 2 / 5 / 21 Report Type: G1-21

Original Amendment Special Election Report

(6) **Contributions This Report**

Cash & Checks \$ _____ , _____ , 281 . 00
 Loans \$ _____ , _____ , 700 . 00
 Total Monetary \$ _____ , _____ , 981 . 00
 In-Kind \$ _____ , _____ , _____ . _____

(7) **Expenditures This Report**

Monetary Expenditures \$ _____ , _____ , 469 . 44
 Transfers to Office Account \$ _____ , _____ , _____ . _____
 Total Monetary \$ _____ , _____ , 469 . 44

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

(9) **TOTAL Monetary Contributions To Date**
 \$ _____ , _____ , 981 . 00

(10) **TOTAL Monetary Expenditures To Date**
 \$ _____ , _____ , 469 . 44

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

X *[Signature]*
 Signature

(Type name) Heather Norton
 Candidate Chairperson (only for PC and PTY)

X *[Signature]*
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Heather Norton (2) I.D. Number _____

(3) Cover Period 2 / 1 / 21 through 2 / 5 / 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
(6) Sequence Number		Type	Occupation	Type	Description		Amount
2 / 2 / 21 1	Norton, Heather 2105 Bow Lme Safety Harbor FL 34695	S		LOA			700.00
2 / 4 / 21 2	Alana Sanchez Paypal Donation 37 Osprey St. Safety Harbor FL 34695	I		CAS Paypal			10.00
2 / 4 / 21 3	Andrew Frazier 101 2nd AVE N #104 Safety Harbor FL 34695	I		CAS Paypal			1.00
2 / 4 / 21 4	Amy Triplett 1207 Woodcrest Ave Safety Harbor FL 34695	I		CAS Paypal			20.00
2 / 4 / 21 5	Robert Levin 1831 N Belcher Rd Ste 0-2 Clearwater, FL 33765	I	Physician	CAS Paypal			250.00
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Heather Norton

(2) I.D. Number _____

(3) Cover Period 2/1/21 through 2/5/21

(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
2/2/21	Signs on The Cheap Website order Ste 100 11525 A Stonehollow Dr. Austin, TX 78758	Signage, Political Advertising	MON		288.86
1					
2/2/21	Vista Print online order 275 Wyman St. Lexington, MA 02421	Door Hangers	MON		180.58
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					