NAME OF CANDIDATE Debra Lauret NAME OF OFFICE City Council 1. Total contributions of donors more than \$50.00\$ 2. Aggregate total of contributions of \$50.00 or less\$ 3. Total campaign expenditures					
	Cash Contributions				
Date	Name of Donor	Amount			
9					
TOTAL \$0.00					
Plant Bloom	In-Kind Contributions				
Date	Name of Donor	Estimated Amount			

		ir	
TOTAL		\$0.00	

(If additional space is needed, use blank paper and list information using same format as above and attach to this statement)