

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CityPAC
 Name
 (2) 301 Quay Commons #1403
 Address (number and street)
Sarasota, FL 34236
 City, State, Zip Code

OFFICE USE ONLY

Received July 26, 2024

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

(4) Check appropriate box(es):

Candidate Office Sought: _____

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 07 / 13 2024 To 07 / 19 2024 Report Type: 2024P4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0.00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0.00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 1,352.00

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

Total Monetary \$ _____ , _____ , 1,352.00

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

(9) TOTAL Monetary Contributions To Date
 \$ _____ , 148 726 73 . _____

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , 76 329 11 . _____

(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) Shirl Gauthier

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

X Shirl Gauthier
 Signature

(Type name) Donna Perry Moffitt

Candidate Chairperson (only for PC and PTY)

X Donna Perry Moffitt
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CityPAC (2) I.D. Number _____

(3) Cover Period 07 13 2024 / _____ / _____ through 07 19 2024 / _____ / _____ (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
/ /	None						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CityPAC

(2) I.D. Number _____

(3) Cover Period 07 / 13 / 2024 through 07 / 19 / 2024

(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					
07 / 15 / 2024	Tempo News Sarasota, FL	Media	mon		\$1,000.00
01					
07 / 19 / 2024	Visions Unlimited Productions Sarasota, FL	Audio/Visual	mon		\$ 77.00
02					
07 / 19 / 2024	Northside Tax Service Tallahassee, FL	2023 tax filing	mon		\$ 275.00
03					
/ /					
/ /					
/ /					
/ /					
/ /					