CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	CityPAC	OFFICE USE ONLY						
(6)	Name	D 1 11 10 100 100 1						
(2)	301 Quay Commons, #1403 Address (number and street)	Received August 23, 2024						
	Sarasota, FL 34236	,						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:						
(4)	Check appropriate box(es):							
 ☐ Candidate Office Sought: ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be individual making electioneering communications) 								
(5) Report Identifiers								
Cov	er Period: From 08/ 16 2024 To	08/ 16 2024 Report Type: 2024P7A						
V C	Original Amendment Spe	cial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cas	h & Checks \$, , ,0.00	Monetary Expenditures \$, ,1,393,00						
Loa	ns \$,,	Transfers to Office Account \$, , .						
Tota	al Monetary \$, , 0.00	Total Monetary \$, , , , , 1,393.00						
In-K	ind \$, ,							
		(8) Other Distributions \$, ,						
(9)	TOTAL Monetary Contributions To Date \$, 148,726.73	(10) TOTAL Monetary Expenditures To Date \$, 82,901.14						
	` '	tification						
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:								
	Shirl Cauthion	_(Type name) Donna Perry Moffitt						
	Type name) STITT GAUTITIET ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer relectioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
_×		x Donna Perry Moffitt						
S	ignature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CityPAC				(2) I.D. Number	
(3) Cover Period	08/ 16 2024	through	08, 16 2,024	(4) Page	_ of

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	
08/ 16/ 2024	Meyer, Blohm & Powell, P.A. Tallahassee, FL	Legal	mon		\$ 585.00
08/16/2024	U.S. Liability Insurance Co. Baltimore, MD	Insurance	mon		\$ 808.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number					
(3) Cover Period	08 16 2024	throu	gh/	6 2024	_ (4) Page	<u> </u>	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	0	(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
1 1	None	Туро	Cocapation	Туро	Beschpton		7 HITOURE	
1 1	×							
1 1								
1 1								
1 1								
1 1								
1 1								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES