CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	CityPAC	OFFICE USE ONLY							
(0)	Name								
(2)	301 Quay Commons #1403 Address (number and street)	Received October 25, 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) ☐ Check here if PC or ECO has disbanded									
	☐ Party Executive Committee (PTY) [☐ Independent Expenditure (IE) (also covers an [	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed☐							
	individual making electioneering communications)								
(5) Report Identifiers									
Cov	er Period: From 10 /12 20/24 To	10 /18 20/24 Report Type: 2024G5							
<b>₽</b> C	Original Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cas	h & Checks \$ , , ,0.00	Monetary Expenditures \$ , ,450.00							
Loa	ns \$,,,,,	Transfers to Office Account \$ , , .							
Tota	al Monetary \$ , , 0 00	Total Monetary \$ , 450.00							
In-K	ind \$ , ,								
		(8) Other Distributions \$ ,							
(9)	TOTAL Monetary Contributions To Date \$,173,961.47	(10) TOTAL Monetary Expenditures To Date \$,170,088.86							
	(11) Cert	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:									
_(7	<sub>Type name)</sub> Shirl Gauthier	(Type name) Donna Perry Moffitt							
	Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☑ Chairperson (only for PC and PTY)							
×	Shirl Gauthier	x Donna Perry Moffitt							
S	ignature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES  (1) Name CityPAC (2) I.D. Number (2) I.D. Number (2) I.D. Number (3) I.D. Number (4) I.D. Number (4) I.D. Number (5) I.D. Number (5) I.D. Number (6) I.D.									
(3) Cover Perio	d	18 2024 (4	(4) Page of						
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)				
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount				
10/ 18/ 2024	Meyers, Blohm, & Powell, P.A. Tallahassee, FL		mon		\$450.00				
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name CityPAC (2) I.D. Number							
(3) Cover Period	I / /	throu	gh/	/	_ (4) Page	1	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code None this period.	Co Type	(8)  ontributor  Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12)
1 1							
I I							
1 1							
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES