

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CityPAC

Name

(2) 301 Quay Commons, #1403

Address (number and street)
Sarasota, FL 34236

City, State, Zip Code

☐ Check here if address has changed

OFFICE USE ONLY

Received October 29, 2024

(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 PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10/ 28 2024 To 10/ 28 2024 Report Type: 2024D4

☒ 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 \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 173,961.47

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , _____ . _____

(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