CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Alice White	OFFICE USE ONLY								
Name (2) 3597 Froude St.	CITY CLERK								
(2) 3597 Froude St. Address (number and street)	7 OCT 24PK12:10:37								
North Port FI 34286	CITY OF NORTH PORT								
City, State, Zip Code									
Check here if address has changed	(3) ID Number:								
I) Check appropriate box(es): ☑ Candidate Office Sought North Port City Commissioner District 1									
☐ 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 $\frac{9}{4}$ / $\frac{31}{4}$ / $\frac{34}{4}$ To $\frac{10}{4}$ / $\frac{34}{4}$ Report Type: $\frac{203464}{4}$									
Original Amendment Special Election Report									
(6) Contributions This Report	(7) Expenditures This Report								
Cash & Checks \$,, <u>05</u> 0 <u>00</u>	Monetary Expenditures \$								
Loans \$	Transfers to Office Account \$, , .								
Total Monetary \$, / , <u>0.50</u>	Total Monetary \$								
In-Kind \$,									
	(8) Other Distributions \$,								
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
\$, <u>3</u> , <u>010</u> . <u>00</u>	\$,1, 046. 42								
(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) Alice White	(Type name) Alice White								
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☑ Candidate ☐ Chairperson (only for PC and PTY)								
x aluci (white	* Cluce White								
Signature	Signature								

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Alice White (2) I.D. Number								
(3) Cover Period 9 121124 through 10104124 (4) Page 1 of 1								
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
9,23,24	White Africe 3597 Fronde St. North Part Fl. 34286	S	retired.	CHE	MA	_	1,000.00	
9,30,24	A Spaugh, Mary 6258 Lenape Ln North Part Pl 34291	T	retired	CHE	NA		50,00	
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK
7 OCT*24PH12:10:45
CITY OF NORTH PORT