	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Alice White	OFFICE USE ONLY							
	Name								
(2)	3597 Froude St. Address (number and street)	GITY GLERK 29 OCT'24AH11:01:29							
	North Port FI 34286	CITY OF NORTH PORT							
	City, State, Zip Code	CALLOT MOVERS ON							
	Check here if address has changed	(3) ID Number:							
(4)	Check appropriate box(es):	ty Commissioner District 1							
	<ul> <li>✓ Candidate Office Sought:</li> <li>✓ Political Committee (PC)</li> <li>✓ Electioneering Communications Org. (ECO)</li> <li>✓ Party Executive Committee (PTY)</li> <li>✓ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul> Check here if PT or EC has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed								
(5) Report Identifiers 2024									
Cove	er Period: From 10119124 To	101 31 1 24 Report Type: <u>G</u> 6							
(X)(0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$_ <del></del>	Monetary Expenditures \$ , , \$59							
Loar	s \$_ <del>,,</del>	Transfers to Office Account \$							
Tota	I Monetary \$	Total Monetary \$ , , , \$59 .   )							
In-Ki	ind \$								
		(8) Other Distributions							
(9)	TOTAL Monetary Contributions To Date \$,3,	(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:									
(T	ype name) Alice White	(Type name) Alice White							
	Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer electioneering comm.)	☑ Candidate ☐ Chairperson (only for PC and PTY)							
X	Auce Whill	* Aleici White							
Si	gnature	Signature							

CITY CLERK 29 OCT'24AH11:01:35

## CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES RITH PORT

(1) Name Alice	White						(2) I.D. Number			<b>-</b>
(3) Cover Period	10,	19,	$24$ through_	101	311	24	(4) Page	1	of	l

(5)	(7) (8) (9) (10)					
(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	(11) Amount	
10/21/24	Smeet Caroline Social 1208 N. Greenbriar Re Munci'e IN 47304	Social Media Mavager	CAN		600,00	
10/25/24	Tampa FL 33607	Media Manager ( )	CAN		8500	
10/19/24	Roughs Ready Media 2841 Nabale Malory Tampa Fl 33607	Modio Manager	CAN	<i>a</i>	85,00	
10/9/24	Build-A-Sign 11525A StonehollowAn Austh TX 78758	sign stands	CAN		89. VI	
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