

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alice White
Name

(2) 3597 Froude St.
Address (number and street)

North Port Fl 34286
City, State, Zip Code

OFFICE USE ONLY
CITY CLERK
5 AUG'24AM10:03:16
CITY OF NORTH PORT

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: North Port City Commissioner District 1

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 7/27/24 To 8/2/24 Report Type: 2024P6

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0, 00, 00

Loans \$ 0, 00, 00

Total Monetary \$ 0, 00, 00

In-Kind \$ 0, 00, 00

(7) Expenditures This Report

Monetary Expenditures \$ 0, 00, 00

Transfers to Office Account \$ 0, 00, 00

Total Monetary \$ 0, 00, 00

(8) Other Distributions

\$ 0, 00, 00

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 710.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 425.74

(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

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

Alice White
Signature

(Type name) Alice White

Candidate Chairperson (only for PC and PTY)

Alice White
Signature