

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Rohan
 Name

(2) 239 S. Cove Terrace Dr.
 Address (number and street)

Panama City, FL 32401
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1299177]

Submitted on:
 8/21/2023 18:07:43 (eastern)

Check here if address has changed (3) ID Number: 628

(4) Check appropriate box(es):

Candidate Office Sought: Panama City Mayor

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 4 / 1 / 2023 To 4 / 13 / 2023 Report Type: M4D

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 100 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 100 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 46 , 803 . 08

(10) TOTAL Monetary Expenditures To Date
 \$, 47 , 239 . 17

(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) _____

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

X _____
 Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael Rohan (2) I.D. Number 628
 (3) Cover Period 4/1/2023 through 4/13/2023 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
4/10/2023 / /	Ray, Cathy 100 Kane Road Headland, AL 36345	I	educator	CH		Add	\$100.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Rohan

(2) I.D. Number 628

(3) Cover Period 4/1/2023 through 4/13/2023

(4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
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