

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Kathleen L. Coppola

Name

(2) 18798 Countryman Ave

Address (number and street)

Port Charlotte, FL 33948

City, State, Zip Code

☐ **CHECK IF ADDRESS HAS CHANGED**

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** Airport Authority District 4

☐ **Political Committee**

☐ **Committee of Continuous Existence**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF PC HAS DISBANDED**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED**

OFFICE USE ONLY

ONLINE SUBMISSION

[1020495]

Submitted on:

8/16/2010 15:27:45 (eastern)

(3) **ID Number:** 217

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/2010 To 9/16/2010 / Report Type TRJUN

☒ **Original** ☐ **Amendment** ☐ **Special Election Report** ☐ **Independent Expenditure Report**

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 50.00

Loans \$ 0.00

Total Monetary \$ 50.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary
Expenditures \$ 6,050.00

Transfers to Office
Account \$ 0.00

Total
Monetary \$ 6,050.00

(8) **Other Distributions**
\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 6,050.00

(10) TOTAL Monetary Expenditures To Date

\$ 6,050.00

(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 electioneering commun.)** ☐ **Treasurer** ☐ **Deputy Treasurer**

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☐ **Candidate** ☐ **Chairperson (only for PC, PTY & electioneering commun. organization)**

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Kathleen L. Coppola **(2) I.D. Number** 217
(3) Cover Period 4/1/2010 through 9/16/2010 **(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
6/18/2010 / /	Lee, Donald Maplewood Drive Punta Gorda, FL 33980	I		CA			\$50.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kathleen L. Coppola

(2) I.D. Number 217

(3) Cover Period 4/1/2010 through 9/16/2010

(4) Page 1 of 1

(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
6/14/2010 / /	Supervisor of Elections, 226 Taylor Street Punta Gorda, Fl 33950	qualifying fee for election	MO		\$450.00
1					
8/16/2010 / /	Coppola, Kathleen L. 18798 Countryman Ave. Port Charlotte, Fl 33948	repay loan	MO		\$5,600.00
2					
/ /					
/ /					
/ /					
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