

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kathleen Coppola  
 Name  
 (2) 18798 Countryman Ave  
 Address (number and street)  
Port Charlotte,, FL 33948  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1080168]

Submitted on:  
 10/24/2014 18:09:41 (eastern)

Check here if address has changed (3) ID Number: 411

(4) Check appropriate box(es):

Candidate Office Sought: Airport Authority District 4

Political Committee (PC)  Check here if PC or ECO has disbanded

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

Party Executive Committee (PTY)  Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

### (5) Report Identifiers

Cover Period: From 10 / 11 / 2014 To 10 / 17 / 2014 Report Type: G6

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        , 1 , 928 . 65

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        , 1 , 928 . 65

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

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 7 , 800 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 2 , 531 . 47

### (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 Kathleen Coppola (2) I.D. Number 411

10/11/2014 through 10/17/2014

(3) Cover Period      /      /      through      /      /      (4) Page 1 of 0

(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
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Kathleen Coppola

(2) I.D. Number 411

(3) Cover Period 10/11/2014 through 10/17/2014

(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) Sequence Number					
10/13/2014 //	M.B.A, Business Service Center 3821 B Tamiami Trail Port Charlotte, FL 33952	mailing campaign materials	MO		\$1,928.65
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