

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Pamella A. Seay  
 Name

(2) 155 Danforth Dr  
 Address (number and street)

Port Charlotte, FL 33980  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1103649]

Submitted on:  
 5/3/2016 14:19:21 (eastern)

Check here if address has changed

(3) ID Number: 469

(4) Check appropriate box(es):

- Candidate Office Sought: Airport Authority District 1
- 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 / 2016 To 4 / 30 / 2016 Report Type: M4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        , 1 , 000 . 00

Total Monetary \$        , 1 , 000 . 00

In-Kind \$        ,        , 160 . 49

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 22 . 61

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 22 . 61

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 1 , 000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 22 . 61

### (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 Pamella A. Seay (2) I.D. Number 469  
 (3) Cover Period 4/1/2016 through 4/30/2016 (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) Sequence Number							
4/19/2016 / /	Seay, Pamella 155 Danforth Dr. Port Charlotte, FL 33980	I	professor	LO			\$1,000.00
1							
4/19/2016 / /	Seay, Pamella 155 Danforth Dr. Port Charlotte, FL 33980	I	professor	IK	website		\$160.49
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Pamella A. Seay

(2) I.D. Number 469

(3) Cover Period 4/1/2016 through 4/30/2016

(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
4/20/2016 //	Charlotte State Bank & Trust, 1100 Tamiami Tr. Port Charlotte, FL 33953-3803	purchase checks	MO		\$22.61
1					
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