CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Kathleen Coppola	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1176455]							
(2) 18798 Countryman Ave Address (number and street)	Submitted on:							
Port Charlotte, FL 33948	10/17/2018 16:30:40 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 534							
(4) Check appropriate box(es):								
<ul> <li>☐ Candidate Office Sought: Airport Authority District 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
(5) Repor	rt Identifiers							
Cover Period: From $10 / 6 / 2018$ To	2 10 / 12 / 2018 Report Type: <u>G5</u>							
☒ Original   ☐ Amendment   ☐ Sp	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , _50 . 00	Monetary							
Loans \$	Transfers to Office Account \$ , , , 0 . 00							
Total Monetary \$	Total Monetary \$ , 189 . 20							
In-Kind \$,,0 . 00	Total Monetary \$ , , <u>189</u> . <u>20</u>							
	(8) Other Distributions \$ , , 000_							
(9) TOTAL Monetary Contributions To Date \$ , 8 , _19450	(10) TOTAL Monetary Expenditures To Date \$ , 1 ,30408							
It is a first degree misdemeanor for any per- I certify that I have examined this report and it is true, cor  (Type name)  Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)							
X Signature	X Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Kathleen Coppola			2) I.D. Numbe	er <u>5</u>	34
	10/6/2018 od///	1	0/12/2018	(A) Pag	1	of <sup>1</sup>
(3) Cover Ferri	ou	 ,agri	· ·	(4) Fag		01
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10/12/2018	Riposta, Kathy 2020 Park St Apt 1015	retired	СН	Description		\$50.0
1	Jacksonville, FL 32204					
1 1						
1 1						
				,		
1 1						
1 1						
J I						
1 1						
1 1						

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

(1) Name	Kathlee	n Copp	ola				 (2) I.D. Nun	nber	5	534	
	1	0/6/2	018		10/12/	2018					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/6/2018	Walmart, 19100 Murdock Cir Port Charlotte, FL 33948	mailing supplies.	МО		\$189.20
1					
//					
//					
//					
_//_					
//					
//					
DS-DE 14 (Rev.					