	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Liza King	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	P 0 Box 151613	Submitted on:								
	Address (number and street) Cape Coral, FL 33915	8/12/2022 09:29:00 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 1782								
(4)	Check appropriate box(es):									
	Check appropriate box(es).  Clerk of the Circuit Court and Comptroller  Political Committee (PC)  Electioneering Communications Org. (ECO)  Party Executive Committee (PTY)  Independent Expenditure (IE) (also covers an individual making electioneering communications)  CLERK OF THE CIRCUIT COURT AND COMPTROLLER  Check here if PC or ECO has disbanded  Check here if PTY has disbanded  Check here if no other IE or EC reports will be filed									
	(5) Report	Identifiers								
Cove	er Period: From 7 / 30 / 2022 To	8 / 5 / 2022 Report Type: P6								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ , , <u>750</u> . <u>00</u>	Monetary								
Loar	<del></del>	Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$ , , <u>750</u> . <u>00</u>	Total Manatani, C								
In-Ki	ind \$,, <u>0</u> .00	Total Monetary \$ , , _10 . 00								
		(8) Other Distributions \$ , , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$,48,205 \cdot00 \$ \$,42,162 \cdot63									
(T	(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									
X		X								
Si	gnature	Signature								

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

(1) Name Liza	King				(2				
	7/30/20	22		8/5/2	1022				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of <sup>1</sup>	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	Contributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
8/5/2022	SALOME, CARMEN P.O.BOX 151613 CAPE CORAL, FL 33915	Ī	retired	CH			\$100.0
8/2/2022	HOFFMAN, JOSEPH 1617 HENDRY STREET STE 409 FORT MYERS, FL 33901	В	attorney	СН			\$500.0
8/1/2022	WILCOX, SANDY P.O. BOX 151613 CAPE CORAL, FL 33915	I	retired	СН			\$100.0
8/1/2022 / /	PRESTON, MARYANNE 11054 WINE PALM ROAD FORT MYERS, FL 33966	I	retired	СН			\$50.0
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1 1							
1 1							

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

(1) Name	Liza King								 (2) I.D. Number			1782		
		7/3	0/20	)22		8/5	/202	2		7				
(3) Cover Per	riod		1	1	through		1	1	(4	) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
7/30/2022	LEE COUNTY SOE, 2480 THOMPSON STREET	voetr data	МО		\$10.00
1	FORT MYERS , FL 33901			5	
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