	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Liza King	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	P O Box 151613	Submitted on:								
	Address (number and street)	11/2/2022 15:07:51 (eastern)								
	Cape Coral, FL 33915 City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number: 1782								
/ A\		(3) ID Number								
(4)	Check appropriate box(es):	CIRCUIT COURT AND COMPTROLLER								
		CIRCUIT COURT AND COMPTROLLER								
		☐ Check here if PC or ECO has disbanded								
		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								
Cove	er Period: From 7 / 30 / 2022 To	8 / 5 / 2022 Report Type: P6								
□ 0	Original Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
		Monetary								
Cash	h & Checks \$, ,10 . 00	Expenditures \$, , 0 . 00								
	\$ 0.00	T								
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$								
Tota	al Monetary \$,,10 . 00	Office Account \$, , , 0 . 00								
TOla	Il Monetary \$,,,	Total Monetary \$. 0 . 00								
In-Ki	ind \$, , 10 . 00	Total Monetary \$, , 0 . 00								
III-txi	nd	(8) Other Distributions								
		\$								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>50</u> , <u>715</u> . <u>84</u>								
		tisiantian								
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)										
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:								
	ype name) Individual (only for IE Treasurer Deputy Treasurer	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
	electioneering comm.)	Gandidate Gonali person (only for For and First)								
v		V								
X Si	gnature	X Signature								

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Liza King	(2) I.D. Number					
7/30/2022			8/5/2022		1		
(3) Cover Peri	od///	through	_	(4) Pa	ge <u> </u>	of	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)	(9)	(10)	(11)	(12)	
Number	City, State, Zip Code King, Liza	Type Occupation I chief	Type CH	Description soe data	Amendment	Amount \$10.0	
7/30/2022	P.O. Box 151613 Cape Coral, Fl 33915	deputy				, 2000	
1							
7/30/2022 / /	King, Liza P.O. Box 151613 Cape Coral, Fl 33915	I chief deputy	IK	soe data	Add	\$10.0	
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1 1							

(1) Name Liza	CAMPAIGN TREASURER'S R		EXPENDITURES 2) I.D. Number		
	7/30/2022 8/5 // through	5/2022	, I) Page <u>1</u>		0
(5) Date (6) Sequence Number	(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)	(11)
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