	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Michele Langford	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	9370 NE Hwy 27 Alt	Submitted on:								
	Address (number and street) Bronson, FL 32621	4/8/2024 21:09:13 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 296								
(4)	_	(6) 15 Italiani.								
(-)	4) Check appropriate box(es): ☐ Candidate Office Sought: Tax Collector ☐ 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										
Cove	er Period: From $\frac{1}{1}$ / $\frac{1}{2024}$ To									
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
	n & Checks \$,,,000	Monetary								
Loar	s , , , , 000	Transfers to Office Account \$,,,0 . 00								
Total Monetary \$, , 0 . 00		Total Monetary \$, , _30 . 00								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$, , <u>0</u> 00								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>150</u> 00	\$,, <u>129</u> . <u>66</u>								
Ιc	(11) Cert It is a first degree misdemeanor for any pers ertify that I have examined this report and it is true, corr									
(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		×								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Michele Langford	(2) I.D. Number							
1/1/2024			3	/31/2024					
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e 1	of 0		
1004 MB									
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)				Door In Process				
Sequence Number	Street Address &		ontributor	Contribution	In-kind	Amendment	N		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
, ,									
1 1									
3									
1									
, ,									
1 1									
8									
I I									
2 2									
1									
I									
<i>a</i> 6									
1 1									
1 1									

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Michele	Langf	ord				 (2) I.D. Nun	nber	2	296	
	1	/1/20	24		3/31/20	24					
(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
1/11/2024	Seacoast Bank, 331 E Hathaway Ave Bronson, FL 32621	maintenance fee	МО		\$10.00
1					
2/13/2024	Seacoast Bank, 331 E Hathaway Ave Bronson, FL 32621	maintenance fee	МО		\$10.00
2					
3/12/2024	Seacoast Bank, 331 E Hathaway Ave Bronson, FL 32621	maintenance fee	МО		\$10.00
3					
//					
//					
_/ /					
//					
DS-DE 14 (Rev.					