

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Carol Ann Felts
 Name
 (2) 6055 CR 675
 Address (number and street)
Myakka City, FL 34251
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1288146]

Submitted on:
 11/18/2022 12:18:46 (eastern)

Check here if address has changed

(3) ID Number: 2000

(4) Check appropriate box(es):

- Candidate Office Sought: COUNTY COMMISSION - DIST. 6 - AT LRG
- 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 8 / 19 / 2022 To 11 / 21 / 2022 Report Type: TR

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 587 . 11

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 587 . 11

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 11 , 080 . 06

(10) TOTAL Monetary Expenditures To Date

\$, 11 , 080 . 06

(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 Carol Ann Felts (2) I.D. Number 2000

8/19/2022 through 11/21/2022

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Carol Ann Felts

(2) I.D. Number 2000

(3) Cover Period 8/19/2022 through 11/21/2022

(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
11/18/2022 / /	Felts, Carol 6055 County Road 675 Myakka City, FL 34251	reimbursement for office supplies	MO		\$587.11
1					
11/18/2022 / /	Felts, Carol 6055 County Road 675 Myakka City, FL 34251	repayment of loan	DI		\$4,770.22
2					
/ /					
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