	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Northeast Polk PAC	OFFICE USE ONLY								
	Name									
(2)	P.O. Box 3233									
	Address (number and street)									
	Haines City, FL 33845 City, State, Zip Code									
	_	(0) 17 11 1								
	Check here if address has changed	(3) ID Number:								
(4)	Check appropriate box(es):									
	Candidate Office Sought:									
	☒ 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	☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
	(5) Report	rt Identifiers								
Cove	er Period: From $\frac{7}{2}$ / $\frac{1}{2}$ / $\frac{2023}{202}$ To	9 / <u>30</u> / <u>2023</u> Report Type: <u>M7</u>								
<u>X</u> 0	riginal Amendment Sp	pecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , 0 . <u>82</u>	Monetary								
Loar	s \$,, <u>0</u> .00	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$,,	Total Monetary \$, , <u>340</u> . <u>00</u>								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions								
		\$, , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, _30 , _72917_	\$, _ 26_, _90055_								
		rtification son to falsify a public record (ss. 839.13, F.S.)								
Lo	I certify that I have examined this report and it is true, correct, and complete:									
	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		_X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameNort	heast Po	lk PAC			(2) I.D. Number _		200	
	7/1/202	3		9/30/	2023				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of ¹	_

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/31/2023	South State bank, po box 9602 WINTER HAVEN, FL 33883	В		IN			\$0.2
8/31/2023 / /	South State Bank, po box 9602 WINTER HAVEN, FL 33883	В		IN			\$0.2
9/29/2023	South State Bank, po box 9602 WINTER HAVEN, FL 33883	В		IN			\$0.2
j j							
j j							
J I							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Northeast	Polk	PAC				 (2) I.D. Nun	nber	2	200	-
	7/1	L/2023	3		9/30/2	2023					
(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
7/5/2023	Google, 601 North 34th Street Seattle, WA 98103	email and website	MO		\$30.00
8/7/2023	Google, 601 North 34th Street Seattle, WA 98103	email and website	MO		\$30.00
9/5/2023	Google, 601 North 34th Street Seattle, WA 98103	email and website	МО		\$30.00
9/25/2023	Troutman Campaign, Becky 2319 Fairmount Ave Lakeland, FL 33803	county commissioner campaign donation	МО		\$250.00
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