

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Shannon M. Martin  
 Name  
 (2) 121 SW Port Saint Lucie Boulevard  
 Address (number and street)  
Port St. Lucie, FL 34984  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1180346]

Submitted on:  
 11/25/2018 15:48:28 (eastern)

Check here if address has changed

(3) ID Number: 366

(4) Check appropriate box(es):

- Candidate Office Sought: City of Port St. Lucie, City Council District 3
- 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 / 24 / 2018 To 11 / 26 / 2018 Report Type: TR-PR

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 \$        ,        , -226 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , -226 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 31 , 144 . 04

### (10) TOTAL Monetary Expenditures To Date

\$        , 31 , 144 . 04

### (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 Shannon M. Martin (2) I.D. Number 366

8/24/2018 through 11/26/2018

(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 Shannon M. Martin

(2) I.D. Number 366

(3) Cover Period 8/24/2018 through 11/26/2018

(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
(6) Sequence Number					
10/20/2018 //	City of PSL, 121 SW Port Saint Lucie Blvd. Port Saint Lucie, FL 34984	return of sign bond from city	RE		\$-250.00
1					
10/1/2018 //	PNC Bank, 300 Fifth Avenue The Tower at PNC Plaza Pittsburgh, PA 15222	bank fee	MO		\$12.00
2					
11/1/2018 //	Rescue Adoption, Inc., 3802 Oleander Avenue Ft. Pierce, FL 34982	disposition to nonprofit	DI		\$200.00
3					
11/1/2018 //	, PNC Bank 300 Fifth Avenue The Tower at PNC Plaza Pittsburgh, PA 15222	bank fee	MO		\$12.00
4					
11/12/2018 //	Stress Mgmt Team, SLC Critical Incident P.O. Box 12414 Fort Pierce, FL 34979	disposition to nonprofit	DI		\$300.00
5					
11/19/2018 //	Creature Safe Place, Inc., 4500 McCarty Road Ft. Pierce, FL 34945	disposition to nonprofit	DI		\$400.00
6					
11/25/2018 //	TC LEO Wives Foundation, 932 SW Bayshore Blvd Port Saint Lucie, FL 34983	disposition to nonprofit	DI		\$500.30
7					
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