

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Chauncelor Roosevelt Howell  
 Name  
 (2) 1349 SW Abingdon Ave  
 Address (number and street)  
Port St Lucie, FL 34953  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1265776]

Submitted on:  
 6/24/2022 09:56:56 (eastern)

Check here if address has changed (3) ID Number: 584

(4) Check appropriate box(es):

Candidate Office Sought: City of Port St. Lucie, Mayor

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 6 / 1 / 2022 To 6 / 17 / 2022 Report Type: P1

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,   1   , 000 . 00

Loans \$      ,      ,   0   . 00

Total Monetary \$      ,   1   , 000 . 00

In-Kind \$      ,      ,   0   . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      , 890 . 17

Transfers to Office Account \$      ,      ,   0   . 00

Total Monetary \$      ,      , 890 . 17

**(8) Other Distributions**  
 \$      ,      ,   0   . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,   1   , 000 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,      , 890 . 17

### (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 Chauncelor Roosevelt Howell (2) I.D. Number 584

6/1/2022 6/17/2022

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

(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
6/8/2022 / /	Garcia-King, Patricia 10124 Crosby Place Port St Lucie, FL 34976	I	real estate agent	CH			\$300.00
1							
6/12/2022 / /	Williams, Bobbie 11398 SW Fieldstone Way Port St Lucie, FL 34987	I	retired veteran	CH			\$200.00
2							
6/12/2022 / /	Howell, Chauncelor 1349 SW Abingdon Ave Port St Lucie, FL 34953	S	retired veteran	CA			\$500.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Chauncelor Roosevelt Howell

(2) I.D. Number 584

(3) Cover Period 6/1/2022 through 6/17/2022

(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
(6) Sequence Number					
6/16/2022 / /	City of Port St Lucie, 121 SW Port St Lucie Blvd Port St Lucie, FL 34984	filing fee	MO		\$890.17
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