	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Robert Johnson	OFFICE USE ONLY					
•	Name	ONLINE SUBMISSION					
(2)	5264 NW Wisk Fern Cir	Submitted on:					
	Address (number and street)	7/22/2022 21:18:30 (eastern)					
	Port St Lucie, FL 34986						
	City, State, Zip Code	(2) 12 11 1					
	Check here if address has changed	(3) ID Number: 589					
(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					
		Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cove	er Period: From 7 / 2 / 2022 To	7 / 15 / 2022 Report Type: P3					
X o	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(-)		Monetary					
Cash	n & Checks \$, , 200 . 00	Expenditures \$, , 30 . 05					
Loar	ns \$,, <u>0</u> .00	Transfers to					
there is a second	*	Office Account \$, , , 0 . 00					
Tota	I Monetary \$, , <u>200</u> . <u>00</u>	Total Manadama (A)					
	f	Total Monetary \$, , _30 . 05					
In-Ki	and \$,,000						
		(8) Other Distributions					
		\$,, <u>0</u> 0					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$	\$,, <u>920</u> 72_					
	(11) Cert It is a first degree misdemeanor for any perso						
Lo	ertify that I have examined this report and it is true, corre	ect, and complete:					
	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
х		V					
	gnature	X Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robe	ert Johns	on			(2	!) I.D. Number _		589	
	7/2/202	2		7/15/	2022				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of ¹	L

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/5/2022	Johnson, Bobby 5264 NW Wisk Fern Cir Port Saint Lucie, FL 34986	S		CA			\$100.0
7/14/2022	Johnson, Bobby 5264 NW Wisk Fern Cir Port Saint Lucie, FL 34986	S		CA			\$80.0
7/15/2022 / /	Johnson, Bobby 5264 NW Wisk Fern Cir Port Saint Lucie, FL 34986	S		CA			\$20.
1 1							
1 1							
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1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Robert	Johnso	n			100	 (2) I.D. Nun	nber	5	589	
		7/2/20	22		7/15/20	022					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
7/8/2022	Harland Clarke - TD, 1660 SW Saint Lucie West Blvd Port St. Lucie, FL 34986	from td bank for check order	МО		\$30.05
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DS-DE 14 (Rev.	11/1/2 \				