

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michelle R. Franklin  
 Name

(2) 5430 Arrowhead Terr  
 Address (number and street)

Port St Lucie, FL 34986  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1297012]

Submitted on:  
 6/5/2023 21:34:18 (eastern)

Check here if address has changed

(3) ID Number: 603

(4) Check appropriate box(es):

- Candidate    Office Sought: Property Appraiser
- 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 5 / 1 / 2023 To 5 / 31 / 2023 Report Type: M5

Original     Amendment     Special Election Report

### (6) Contributions This Report

Cash & Checks    \$        ,   1   , 650 . 00

Loans    \$        ,        ,   0 . 00

Total Monetary    \$        ,   1   , 650 . 00

In-Kind    \$        ,        ,   0 . 00

### (7) Expenditures This Report

Monetary Expenditures    \$        ,        ,   5 . 60

Transfers to Office Account    \$        ,        ,   0 . 00

Total Monetary    \$        ,        ,   5 . 60

### (8) Other Distributions

\$        ,        ,   0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,   38 , 870 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        ,   30 . 40

### (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 Michelle R. Franklin (2) I.D. Number 603  
 (3) Cover Period 5/1/2023 through 5/31/2023 (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) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
5/5/2023 / /	Sperber, Clinton J ***Protected Voter***	I	asst. admin. slc doh	CH			\$100.00
1							
5/5/2023 / /	Rowley, Jane 4380 Christensen Road Fort Pierce, FL 34981	I	retired	CH			\$200.00
2							
5/11/2023 / /	Freeman, Scott 10760 SW Waterway Lane Port St Lucie, FL 34987	I	server admin slcpa	CH			\$100.00
3							
5/11/2023 / /	Garst, Robert 3344 Liberty Square Way Fort Pierce, FL 34982	I	gis spec. slcpa	CH			\$100.00
4							
5/12/2023 / /	Dodson, K LaDeene 3501 S Indian River Drive Fort Pierce, FL 34982-7742	I	business owner	CH			\$1,000.00
5							
5/22/2023 / /	Lounds, Amy 1491 S. Brocksmith Road Fort Pierce, FL 34945	I	business owner	CH			\$100.00
6							
5/31/2023 / /	Sampson, Linda M 241 Bermuda Beach Drive Fort Pierce, FL 34949	I	retired	CH			\$50.00
7							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Michelle R. Franklin

(2) I.D. Number 603

(3) Cover Period 5/1/2023 through 5/31/2023

(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					
5/8/2023 / /	Seacoast National Bank, 1901 S. U.S. Highway 1 Fort Pierce, FL 34950	refund maint fee	RE		\$-3.00
1					
5/16/2023 / /	Anedot, Anedot 1340 Poydras Street Suite 1770 New Orleans, LA 70112	processing fee	MO		\$8.60
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					