

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michelle Renee Miller
Name
(2) 5051 N Highwat Ala, #16-5
Address (number and street)
Fort Pierce, FL 34949
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1305005]
Submitted on:
4/6/2024 08:25:40 (eastern)

Check here if address has changed (3) ID Number: 609

(4) Check appropriate box(es):
 Candidate Office Sought: Clerk of the Circuit Court
 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 1 / 1 / 2024 To 3 / 31 / 2024 Report Type: Q1
 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 \$, , 53 . 00
Transfers to Office Account \$, , 0 . 00
Total Monetary \$, , 53 . 00

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

(9) TOTAL Monetary Contributions To Date
\$, 3 , 637 . 50

(10) TOTAL Monetary Expenditures To Date
\$, , 63 . 00

(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 Renee Miller (2) I.D. Number 609

1/1/2024 through 3/31/2024

(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 Michelle Renee Miller

(2) I.D. Number 609

(3) Cover Period 1/1/2024 through 3/31/2024

(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					
3/1/2024 //	Supervisor of Elections, 4132 Okeechobee Rd. Fort Pierce, FL 34947	petitions	MO		\$53.00
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