CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Lois A. Paritsky Name	OFFICE USE ONLY ONLINE SUBMISSION								
(2)	4757 S. Atlantic Ave, Unit 704	[1248553]								
(-)	Address (number and street)	Submitted on:								
	Ponce Inlet, FL 32127	8/24/2021 08:03:55 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 735								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: Ponce Inlet Mayor/Council Seat 1 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 									
	(5) Report	Identifiers								
	er Period: From 8 / 13 / 2021 To									
<u>X</u> 0	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , ,000	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , 0 . 00	Total Monetary \$, 7 ,345 . 10								
In-Ki	nd \$,,, _0.00									
		(8) Other Distributions \$, , 000								
(9)	(9) TOTAL Monetary Contributions To Date \$, _40_, _53779_ (10) TOTAL Monetary Expenditures To Date \$, _40_, _53779_									
(T	(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 Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)									
X		X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Lois A. Paritsky	(2) I.D. Number									
	8/13/2021		8	/20/2021							
(3) Cover Perio	od / /	thro	ough	11_	(4) Pag	e	of				
:											
(5)	(7)		(8)	(9)	(10)	(11)	(12)				
Date (6)	Full Name (Last, Suffix, First, Middle)										
Sequence	Street Address &	C	ontributor	Contribution	In-kind						
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount				
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Lois	Α.	Parit	sky					 (2) I.D. Nur	nber	•	735	
		8	/13/20	021		8/20/	2021		**	-			
(3) Cover Po	eriod		1	1	through	1	10	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
8/20/2021	Paritsky, Howard 4757 S. Atlantic Ave Unit 704 Ponce Inlet, FL 32127	return of loan amount. closing out account. this is the final report for this	RM		\$7,345.10
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DS-DE 14 (Rev	4440 1				