

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lois A. Paritsky
 Name
 (2) 4757 S. Atlantic Avenue, Unit 704
 Address (number and street)
Ponce Inlet, FL 32127
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1297331]

Submitted on:
 6/12/2023 08:40:41 (eastern)

Check here if address has changed

(3) ID Number: 949

(4) Check appropriate box(es):

- Candidate Office Sought: Ponce Inlet Mayor/Council Seat 1
- 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 / 2023 To 6 / 16 / 2023 Report Type: P1

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 \$, , 138 . 02

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 138 . 02

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 25 , 000 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 138 . 02

(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 Lois A. Paritsky (2) I.D. Number 949

6/1/2023 through 6/16/2023

(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
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lois A. Paritsky

(2) I.D. Number 949

(3) Cover Period 6/1/2023 through 6/16/2023

(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					
6/6/2023 / /	Town of Ponce Inlet, 4300 South Atlantic Ave Ponce Inlet, FL 32127	qualifying fee	MO		\$134.82
1					
6/5/2023 / /	County of Volusia, Election Department 1750 S Woodland Blvd Deland, FL 32720	signature verification fees	MO		\$3.20
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					