

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MICHELLE WHITMAN
Name

(2) 6270 SW 41 PLACE
Address (number and street)

DAVIE, FLORIDA 33314-3410
City, State, Zip Code

OFFICE USE ONLY

RECEIVED

MAY 9 2022

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: DAVIE TOWN COUNCIL DISTRICT 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 PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 04/01/2022 To 04/30/2022 Report Type: M4

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 280 00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 00

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 0 00

(8) Other Distributions
\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date
\$ _____, _____, 13860 00

(10) TOTAL Monetary Expenditures To Date
\$ _____, _____, 114 71

(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) MICHELLE WHITMAN

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

(Type name) MICHELLE WHITMAN

Candidate Chairperson (only for PC and PTY)

X Michelle Whitman
Signature

X Michelle Whitman
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MICHELLE WHITMAN (2) I.D. Number _____
 (3) Cover Period 04, 01, 2022 through 04, 30, 2022 (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
//					<u>0</u>
//					
//					
//					
//					
//					
//					
//					
//					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name MICHELLE WHITMAN (2) I.D. Number _____

(3) Cover Period 04/01/2022 through 04/30/2022 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation	Type			
04/08/2022	PEGGY DONAHUE 6331 SW 41 PLACE DAVIE, FL. 33314	I	RETIRED	CAS			\$ 20.00
1							
04/08/2022	LINDA DONAHUE 6331 SW 41 PLACE DAVIE, FL. 33314	I	RETIRED	CAS			\$ 20.00
2							
04/08/2022	KYLE TABORA 5351 NW 32 STREET MARGATE, FL. 33063	I	TEACHER	CHE			\$ 100.00
3							
04/18/2022	MARK WATERS 5511 SW 37 CT. DAVIE, FL. 33314	I	RETIRED	CAS			\$ 20.00
4							
04/18/2022	HENRY DEJEAN 5700 SW 37 STREET DAVIE, FL. 33314	I	RETIRED	CAS			\$ 20.00
5							
04/21/2022	ARLIE JEAN GARRETT 6301 SW 41 PLACE DAVIE, FL. 33314	I	RETIRED	CHE			\$ 100.00
6							
1							
1							

RECEIVED

MAY 9 2022

(Signature)