

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Melissa R. Lockhart

Name

(2) 422 Royal Poincianna

Address (number and street)

Punta Gorda, Florida 33955

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Punta Gorda City Council

☐ 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

OFFICE USE ONLY

OFFICE OF THE CITY CLERK

07-07-23 A 11:55 IN

(5) Report Identifiers

Cover Period: From 6 / 1 / 23 To 6 / 16 / 23 Report Type: 2023 P1

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , 0 , 000 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ 0 , 0 , 181 . 84

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ 0 , 0 , 181 . 84

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 0 , 0 , 000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ 0 , 0 , 181 . 84

(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) William E Page

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

X

Signature

(Type name) Melissa Lockhart

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Melissa R. Lockhart

(2) I.D. Number _____

(3) Cover Period 6 / 1 / 23 through 6 / 16 / 23

(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 / 01 / 23	City of Punta Gorda 326 W. Marion Avenue Punta Gorda, FL 33950	Candidate Registration Fee			171.34
TR1			CHE		
5 / 26 / 23	Regions Bank 1401 Tamiami Trail Punta Gorda, FL 33950	Check Fee			10.50
TR2			CHE		
/ /					
/ /					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Melissa R. Lockhart (2) I.D. Number _____

(3) Cover Period 6 / 1 / 23 through 6 / 16 / 23 (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
/ /	NEGATIVE REPORT						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							