CAMPAIGN TREASURER'S REPORT SUMMARY									
(1) SHAUNE GOFF FREELAND	OFFICE USE ONLY								
Name	City of Punta Gorda								
(2) 1950 JAMAICA WAY Address (number and street)									
PUNTA GORDA, FL 33960	C1-03-19 PC2:57 NB								
City, State, Zip Code									
Check here if address has changed	(3) ID Number: N/A								
(4) Check appropriate box(es):									
☐ Candidate Office Sought:CITY COUNC	CIL DISTRICT #3								
Political Committee (PC)									
	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded								
☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	Check here if P i Y has dispanded ☐ Check here if no other IE or EC reports will be filed								
individual making electioneering communications)									
19th Ph									
(5) Report Identifiers									
	07 / 05 / 19 Report Type: P2								
☐ Original ☐ Amendment ☐ Spe	cial Election Report								
(6) Contributions This Report	(7) Expenditures This Report								
	Monetary								
Cash & Checks \$,,	Expenditures \$, , 145 . 68								
Loans \$, Transfers to									
LOUIS	Office Account \$, , .								
Total Monetary \$,									
	Total Monetary \$,,								
In-Kind \$,,									
	(8) Other Distributions								
	\$,,								
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
\$, 22 , 450 . 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) SHAUNE GOFF FREELAND	(Type name) SHAUNE GOFF FREELAND								
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Chairperson (only for PC and PTY)								
The state of the s	The Hunk that								
Monar Ma Fredaya	Maine / My Tree and								
Signature									

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name	lame SHAUNE GOFF FREELAND		(2) I.D. Number			N/A									
(3) Cover Pe	riod	06	1 22	/ 1	9	through	07	/ 05	,	19	(4) Page	2.	of	2.	

	(7)	(0)				
(5) Date	(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	
06 /28 /19	CITY OF PUNTA GORDA	CANDIDATE	CAN	ADD	145.68	
1	326 WEST MARION AVE. PUNTA GORDA, FL 33950	FILING FEE		, ADD	145.00	
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