

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) William (Bill) Dryburgh

Name

(2) 601 Shreve St. 61C

Address (number and street)

Punta Gorda, FL 33950

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 District 2

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

07-30-24P 04:41 RCVD

(5) Report Identifiers

Cover Period: From 07 / 20 / 24 To 07 / 26 / 24 Report Type: 2024 P5

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 250 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 250 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 00 . 00

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

Total Monetary \$ _____ , _____ , 00 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 8 , 110 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 1 , 416 . 31

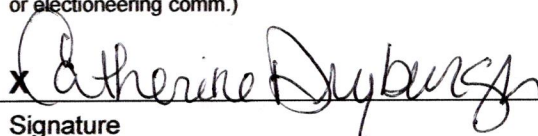
(11) Certification

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:

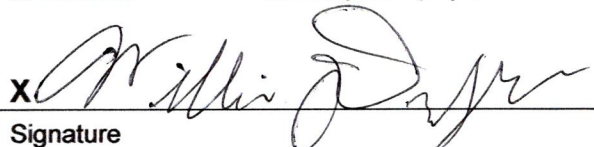
(Type name) Catherine Dryburgh

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

X 
Signature

(Type name) William Dryburgh

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name William (Bill) Dryburgh

(2) I.D. Number _____

(3) Cover Period 07 / 20 / 24 through 07 / 26 / 24

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
07 / 23 / 24 / /	Kathleen Sweetland 512 Belvedere Ct Punta Gorda, FL 33950	I	Retired	CHE			250.00
1							
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