

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Pete Emrich
 Name
 (2) 5662 Gabo Road
 Address (number and street)
North Port FL 34287
 City, State, Zip Code

OFFICE USE ONLY
 CITY CLERK
 10 MAY'22 PM 2:21:04
 CITY OF NORTH PORT

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: _____
 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 4 1 1 2022 To 4 1 30 2022 Report Type: M4
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, \$1,550.00
 Loans \$ _____, _____, _____
 Total Monetary \$ _____, _____, _____
 In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, \$3.00
 Transfers to Office Account \$ _____, _____, _____
 Total Monetary \$ _____, _____, _____

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, \$2,550.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 185.91

(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

CITY CLERK
10 MAY 22 PM 2:20:55

(1) Name Pete Emrich

(2) I.D. Number _____

(3) Cover Period 4/1/22 through 4/30/22

CITY OF NORTH PORT

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type			
4/29/22 2	Firefighters & Paramedics For Public Safety 752 Commerce Dr Venice FL 33592		Firefighter Union	Check #2918			\$1,000.00
4/29/22 3	El Sobrado Group LLC Twisted Fork 3208 El Sobrado Rd Port Charlotte FL 33948		Restaurant Business	check #762			\$500.00
4/29/22 4	Ronnie Connell 7402 Talon Bay Dr North Port, FL 34287		Retired	check #1973			\$50.00
1/1							
1/1							
1/1							
1/1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Pete Emrich

(2) I.D. Number CITY OF NORTH PORT

(3) Cover Period 4/1/22 through 4/30/22

(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
4/1/22	Supervisor of Election Office Biscayne Plaza North Port FL 34267	Verify Signatures on Petition	CK 101		\$3.00
4					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					