

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Philip Stokes  
Name

(2) 20210 Lagarto Circle  
Address (number and street)

North Port, FL 34293  
City, State, Zip Code

Check here if address has changed

**OFFICE USE ONLY**

CITY CLERK  
10 JUN'22AM11:50:42  
CITY OF NORTH PORT

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: North Port Commission District 5

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 5/1/2022 To 5/31/2022 Report Type: 2022-115

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$       , 3,000.<sup>00</sup>

Loans \$       ,       ,       .

Total Monetary \$       ,       ,       .

In-Kind \$       , 3,000.<sup>00</sup>

### (7) Expenditures This Report

Monetary Expenditures \$       ,       , 3.<sup>00</sup>

Transfers to Office Account \$       ,       ,       .

Total Monetary \$       ,       , 3.<sup>00</sup>

### (8) Other Distributions

\$       ,       ,       .

### (9) TOTAL Monetary Contributions To Date

\$       , 3,200.<sup>00</sup>

### (10) TOTAL Monetary Expenditures To Date

\$       ,       , 55.<sup>61</sup>

### (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) Philip Stokes

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

X [Signature]  
Signature

(Type name) Philip Stokes

Candidate  Chairperson (only for PC and PTY)

X [Signature]  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Philip Stokes

(2) I.D. Number 2022-145

(3) Cover Period 5/1/2022 through 5/31/2022 (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
(6) Sequence Number		Type	Occupation	Type	Description		Amount
5/20/22 1	WELLEN PARK LLC 12275 MERCADO DR NORTH PORT	B	DEVELOPER	CHE			\$1000.00
5/20/22 2	WELLEN PARK MGMT ASSOC. LLC 12275 MERCADO DR NORTH PORT	B	MANAGING	CHE			\$1000.00
5/20/22 3	THE LAND COMPANY OPERATIONS 12275 MERCADO DR NORTH PORT	B	DEVELOPER	CHE			\$1000.00
1/1							
1/1							
1/1							
1/1							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Philip Stokes (2) I.D. Number 2022 - MS  
 (3) Cover Period 5/1/2022 through 5/31/2022 (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
(6) Sequence Number					
5/23/22	TRIST BANK JACOBY BLVD VENICE FL 33293	BANK SERVICE FEE	CAND		3.00
2					
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