

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Martin Byrd
Name

(2) 17 Kingsman Circle
Address (number and street)

Fort Myers, FL, 33905
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

SEP 20 11:33PM

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City of Fort Myers City Council Ward 1

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 08 / 19 / 22 To 08 / 26 / 22 Report Type: 22-61

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 0.00

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 246.38

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 246.38

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 3 , 909.04

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 3 , 227.40

(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) Lakasha Levatt

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

X L. Levatt

Signature

(Type name) Martin Byrd

Candidate Chairperson (only for PC and PTY)

X Martin Byrd

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Martin Byrd (2) I.D. Number _____

(3) Cover Period 08 / 19 / 22 through 08 / 26 / 22 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
/ /	N/A						\$0.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Martin Byrd

(2) I.D. Number _____

(3) Cover Period 08 / 06 / 22 through 08 / 18 / 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
(6) Sequence Number					
08 / 19 / 22	Auto 1 Plaza 3045 Fowler St, Fort Myers, FL 33901	Car magnets	CAN		\$246.38
1					
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