

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Giovanna M Faiella (JoAnn)

Name

(2) [REDACTED]

Address (number and street)

Port Saint Lucie, FL 34953

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

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

(4) Check appropriate box(es):

Candidate Office Sought: Mayor of Port Saint Lucie, Florida

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 01 / 01 / 2014 To 01 / 31 / 2014 Report Type: M1

Original

Amendment

Special Election Report

### (6) Contributions This Report

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

Loans \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

In-Kind \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, 12 . 00

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

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 500 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 12 . 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) Sharon J Mack

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

X Sharon J Mack  
Signature

(Type name) Joann M Faiella

Candidate  Chairperson (only for PC and PTY)

X Joann M Faiella  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Giovanna M Faiella (JoAnn) (2) I.D. Number \_\_\_\_\_

(3) Cover Period 01 / 01 / 2014 through 01 / 31 / 2014 (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				
01 / 14 / 2014 1	Paras Investment Company Inc 781 Hidden River Dr Port Saint Lucie, FL 34983	B	Doctor	Check			250.00
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Giovanna M Faiella ( JoAnn)

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 01 / 01 / 2014 through 01 / 31 / 2014

(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					
01 / 31 / 2014	JPMorgan Chase Bank, N.A. P O Box 659754 San Antonio, TX 78265-9754	Bank service charge	DIS		12.00
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