

CAMPAIGN TREASURER'S REPORT SUMMARY



(1) Nina Culver
Name

(2) [Redacted]
City, State, Zip Code

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):
 Candidate Office Sought: City of Margate Commissioner Sect 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 02 / 01 / 2023 To 02 / 28 / 2023 Report Type: 2023M2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . _____

Loans \$ _____ , _____ , 0 . _____

Total Monetary \$ _____ , _____ , 0 . _____

In-Kind \$ _____ , _____ , 0 . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 12 . 00

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

Total Monetary \$ _____ , _____ , 12 . 00

(8) Other Distributions
\$ _____ , _____ , _____ . 0

(9) TOTAL Monetary Contributions To Date
\$ _____ , _____ , 100 . 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) Nina Culver
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

Nina Culver
Signature

(Type name) Nina Culver
 Candidate Chairperson (only for PC and PTY)

Nina Culver
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

MARGATE

(1) Name Nina Culver (2) I.D. Number _____

(3) Cover Period 02 / 01 / 23 through 02 / 28 / 23 (4) Page 08 of 1 **MAR 08 2023**

QUALIFYING OFFICES

(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	Contribution Type	In-kind Description	Amendment	Amount
/ /	N/A						
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Nina Culver (2) I.D. Number _____
 (3) Cover Period 02 / 01 / 2023 through 02 / 28 / 2023 (4) Page 1 of 1

MAR 08 2023

QUALIFYING OFFICES

(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
2/27/23 01	Synovus Bank 5375 W. Atlantic Blvd. Margate, FL 33063	Service Charge	C		12.00
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