| CAMPAIGN TREASURER'S REPORT SUMMARY  |  |   |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| (1)  | Noah Walle   | OFFICE USE ONLY                                 |  |  |  |  |  |
| (2)  | 1400 NW Richerson Glen   |   |  |  |  |  |  |
|  | ddress (number and street)   |   |  |  |  |  |  |
|  | City, State, Zip Code  |   |  |  |  |  |  |
|  | Check here if address has changed (3) ID Number:   |   |  |  |  |  |  |
|  | Check appropriate box(es):  Candidate Office Sought: Mayor of Lake City, 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 PTY has disbanded  Check here if no other IE or EC reports will be filed |   |  |  |  |  |  |
| (5) Report Identifiers   |  |   |  |  |  |  |  |
| Cover I  | Period: From 6 / 1 1 2024 To   | 6 1 14 1 2024 Report Type: 2024 Pl              |  |  |  |  |  |
| ✓ Original ☐ Amendment ☐ Special Election Report   |  |   |  |  |  |  |  |
| (6) C  | ontributions This Report   | (7) Expenditures This Report                    |  |  |  |  |  |
| Cash &   | & Checks \$,,  | Monetary  |  |  |  |  |  |
| Loans  | \$ , ,   | Transfers to Office Account \$,,                |  |  |  |  |  |
|  | fonetary \$,,  | Total Monetary \$ , , <u>2[</u> % . <u>1</u> 9  |  |  |  |  |  |
| In-Kind  | \$,,,  | (O) Other Distributions                         |  |  |  |  |  |
|  |  | (8) Other Distributions                         |  |  |  |  |  |
| (9) T  | OTAL Monetary Contributions To Date  | (10) TOTAL Monetary Expenditures To Date<br>\$, |  |  |  |  |  |
| (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:                                |  |   |  |  |  |  |  |
| ☐ Inc  | dividual (only for IE Treasurer Deputy Treasurer   | (Type name)                                     |  |  |  |  |  |
| X  | Mile Land  | x The Welle                                     |  |  |  |  |  |
| Signa  | ature  | Signature                                       |  |  |  |  |  |

| (1) Name (2) I.D. Number (3) Cover Period (4) Page of |  |  |                      |      |                     |  |  |  |
|---|--|--|----------------------|------|---------------------|--|--|--|
| (5) Date (6) Sequence                                 | (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) | (11)                |  |  |  |
| Number 6/0/201  | . 0 . 1 1  | Election<br>Assesment  | CAN                  |      | <sup>4</sup> 218.19 |  |  |  |
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