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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Autho	orized Com	mittee		Of	ffice Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing, er the lines.	type	12FE4M5	
Lizbeth Benacquisto f	or Congress					1
DDDESS (number and street)	610 S. Boulevard					
DDRESS (number and street)		1 1 1 1 1		1 1 1	1 1 1 1 1 1	
Check if different than previously reported. (ACC)	Tampa			,	FL 33	606
	UMADED W	CITY A			TATE A	ZIP CODE ▲
C C00556241	_	IS THIS REPORT	x NEW (N)	OR	AMENDED (A)	STATE ▼ DISTRICT
. TYPE OF REPORT (C	noose One) (b)	12-Dav PRE	-Election Report	for the:		
(a) Quarterly Reports:		П	Primary (12P)	Г	General (12G	Runoff (12R)
April 15 Quarterly	Report (Q1)	H		2)		
July 15 Quarterly	Report (Q2)		Convention (120	ر)	Special (12S))
October 15 Quarte	erly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January 31 Year-E	nd Report (YE) (c)	30-Day POS	T -Election Repor	t for the:		
			General (30G)		Runoff (30R)	Special (30S)
Termination Repor	t (TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
. Covering Period	M / D D / Y	Y 2022 Y	through	M M 09	/ D D / Y	2022 Y
certify that I have examined to	Watkins, Nancy, H.,		owledge and bel	ief it is tru	e, correct and c	omplete.
	tkins, Nancy, H., ,		[Electronically File	<u>ed]</u> Da	ate 10	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, error	neous, or incomplete info	ormation may s	subject the persor	signing th	nis Report to the p	penalties of 52 U.S.C. §3010
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Lizbeth Benacquisto for Congress

2022 07 2022 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 121325.68 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

Lizbeth Benacquisto for Congress

07 2022 09 30 2022 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	0.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

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COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0.00 0.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0.00 0.00 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.00 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 0.00 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 0.00 25. SUBTOTAL (add Line 23 and Line 24)..... 0.00 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 0.00 (subtract Line 26 from Line 25).....

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 OF 7
FOR LINE NUMBER: (check only one)

13b Transaction ID: SC/10.4104 NAME OF COMMITTEE (In Full) Lizbeth Benacquisto for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Benacquisto, Lizbeth, , , General Mailing Address 610 S. Boulevard Other (specify) Special-Primary City State ZIP Code X Personal Funds of the Candidate FL 33606 Tampa Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D07D M 02M ž014 2/7/2022 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) 50000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Exc

(Use separate schedule(s) for each

PAGE FOR LINE NUMBER: (check only one)

	9
X	10

OF

ХC	cluding Loans			numbered line)	x 10
NA	ME OF COMMITTEE (In Full)				
L	izbeth Benacquisto f	or Co	ongress		
	A. Full Name (Last, First, Middle Initial) of Del Graham, Gula, , ,				ebt (Purpose): g consulting
	Mailing Address 499 S. Capitol Street, S.W., #	420			
٠	City Washington	State DC	Zip Code 20003		
	Outstanding Balance Beginning This Period			Transaction	on ID : SD10.4109
	16800.00				
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
	0.00		0.0	00	16800.00
	B. Full Name (Last, First, Middle Initial) of Deb	tor or Cre	ditor	Nature of D	lebt (Purpose):
	Public Concepts, LLC			direct mail	
	Mailing Address 5730 Corporate Way Suite 214				
	City West Palm Beach	State FL	Zip Code 33407		
	Outstanding Balance Beginning This Period			Transaction	on ID : SD10.4105
	36050.29				
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
	0.00		0.0	00	36050.29
	C. Full Name (Last, First, Middle Initial) of Del	btor or Cr	editor	Nature of D	ebt (Purpose):
	Public Concepts, LLC				website design
	Mailing Address 5730 Corporate Way Suite 214				
	City	State	Zip Code		
	West Palm Beach	FL	33407		
	Outstanding Balance Beginning This Period			Transact	ion ID : SD10.4107
	7480.00				
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
	0.00		0.0	00	7480.00
1)	SUBTOTALS This Period This Page (optional))		>	60330.29
2)	TOTALS This Period (last page this line numb	oer only) ···		>	
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last	page only)·····	>	

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 7 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

NAME OF COMMITTEE (In Full)

Lizheth Repacquisto for Congress

		ongress		
A. Full Name (Last, First, Middle Initial) o			Nature of Debt (Purpose): voter contact	
Mailing Address 5730 Corporate Way Suite 214				
City West Palm Beach	State FL	Zip Code 33407		
Outstanding Balance Beginning This Pe	riod		Transaction ID : SD10.4108	
5995.39				
Amount Incurred This Period	_	Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5995.39	
B. Full Name (Last, First, Middle Initial) of Timothy Baker Consulting, L	Nature of Debt (Purpose): political strategy consulting			
Mailing Address P. O. Box 424				
City Tallahassee	State FL	Zip Code 32302		
Outstanding Balance Beginning This Pe		02002		
	lod		Transaction ID : SD10.4111	
5000.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	5000.00	
C. Full Name (Last, First, Middle Initial) o	Debtor or Cre	ditor	Nature of Debt (Purpose):	
Mailing Address				
Mailing Address City	State	Zip Code		
		Zip Code		
City		Zip Code		
City		Zip Code Payment This Period	Outstanding Balance at Close of This Period	
City Outstanding Balance Beginning This Pe			Outstanding Balance at Close of This Period	
City Outstanding Balance Beginning This Pe	riod	Payment This Period	Outstanding Balance at Close of This Period 10995.39	
City Outstanding Balance Beginning This Pe Amount Incurred This Period	riod onal)	Payment This Period		
City Outstanding Balance Beginning This Pe Amount Incurred This Period 1) SUBTOTALS This Period This Page (optic	onal)	Payment This Period	10995.39	