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REPORT OF RECEIPTS AND DISBURSEMENTS

| For An Authorized Committee | | | Office Use Only | | |
|--|--|--|-------------------------|------------------------------|--|
| NAME OF COMMITTEE (in full) TYPE OR P | | example: If typing, type over the lines. | 12FE4M5 | | |
| Lizbeth Benacquisto for Congre | ess | | | ı | |
| | | | | | |
| | | | | | |
| ADDRESS (number and street) | ulevard | | | | |
| ▼ Check if different | | | | | |
| than previously Tampa reported. (ACC) | | | FL 336 | 606 | |
| 2. FEC IDENTIFICATION NUMBER ▼ | CITY ▲ | | STATE ▲ | ZIP CODE ▲ | |
| C C00556241 | 3. IS THIS REPORT | NEW (N) OR | AMENDED (A) | STATE ▼ DISTRICT | |
| 4. TYPE OF REPORT (Choose One) | (b) 12-Day PR | E -Election Report for the | a· | Ī | |
| (a) Quarterly Reports: | (b) 12-Day FR | | | | |
| April 15 Quarterly Report (Q1) | Ш | Primary (12P) | General (12G) | Runoff (12R) | |
| | | Convention (12C) | Special (12S) | | |
| July 15 Quarterly Report (Q2) | | M M / D D | / Y Y Y Y | in the | |
| October 15 Quarterly Report (Q | 3) Election of | | | State of | |
| January 31 Year-End Report (YE | (c) 30-Day PO | ST-Election Report for the | he: | | |
| | П | General (30G) | Runoff (30R) | Special (30S) | |
| Townstation Board (TER) | | (5 5 5) | | - open (000) | |
| Termination Report (TER) | Election of | n | / Y Y Y Y | in the State of | |
| 5. Covering Period 01 / 01 | 7 Y Y Y Y Y Y 2022 | through 0 | M / D D / Y | Y Y Y 2022 | |
| I certify that I have examined this Report ar Watkins, Type or Print Name of Treasurer | nd to the best of my l Nancy, H., , | knowledge and belief it is | s true, correct and co | mplete. | |
| | | | M M / | D D / Y Y Y Y | |
| Watkins, Nancy, H. Signature of Treasurer | ·, , | [Electronically Filed] | Date 04 | 04 2022 | |
| NOTE: Submission of false, erroneous, or inco | mplete information may | subject the person signir | ng this Report to the p | enalties of 52 U.S.C. §30109 | |
| Office | | | | FEC FORM 3 | |
| Use Only | | | ' | (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 01 2022 03 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

01 03 01 2022 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)...... 0.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 0.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 0.00 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 0.00 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

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FEC Form 3 (Revised 05/2016)

of Disbursements

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**

Excluding Loans

1)

2)

3)

4)

(Use separate schedule(s) for each numbered line)

PAGE 6 OF FOR LINE NUMBER: (check only one)

| | 9 |
|---|----|
| Y | 10 |

NAME OF COMMITTEE (In Full)

| Lizbeth Benacquisto for Congress |
|----------------------------------|
|----------------------------------|

| izbetti beriacquisto i | | nigicaa | | |
|--|------------------|-------------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Graham, Gula, , , | | | Nature of Debt (Purpose): fundraising consulting | |
| Mailing Address 499 S. Capitol Street, S.W., | #420 | | | |
| City | Ctoto | Zin Codo | _ | |
| City | State | Zip Code | | |
| Washington | DC | 20003 | | |
| Outstanding Balance Beginning This Period | l I | | Transaction ID : SD10.4109 | |
| 16800.00 | | | | |
| Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | | 0.00 | 16800.00 | |
| | | 7 | , , , , , | |
| B. Full Name (Last, First, Middle Initial) of De | btor or Cred | itor | Nature of Debt (Purpose): | |
| Public Concepts, LLC | | | direct mail services | |
| Mailing Address 5730 Corporate Way Suite 214 | | | | |
| City | State | Zip Code | | |
| West Palm Beach | FL | 33407 | | |
| Outstanding Balance Beginning This Period 36050.29 Amount Incurred This Period 0.00 | | Payment This Period 0.00 | Transaction ID : SD10.4105 Outstanding Balance at Close of This Period 36050.29 | |
| C. Full Name (Last, First, Middle Initial) of De | ebtor or Cred | ditor | Nature of Debt (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 7480.00 | | | Transaction ID : SD10.4107 | |
| Amount Incurred This Period | | Payment This Period | Outstanding Balance at Close of This Period | |
| 0.00 | | 0.00 | 7480.00 | |
| SUBTOTALS This Period This Page (optional | ıl) | | 60330.29 | |
| TOTALS This Period (last page this line num | nber only) ····· | | | |
| TOTAL OUTSTANDING LOANS from Sched | ule C (last p | age only) | | |
| ADD 2) and 3) and carry forward to appropr | riate line of S | Summary Page (last page only) | | |

NAME OF COMMITTEE (In Full)

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR (che

| LINE NUMBER: | | 1 | |
|--------------|---|----|--|
| ck only one) | | 9 | |
| | X | 10 | |

OF

5000.00

_izbeth Benacquisto for Congress A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): voter contact Public Concepts, LLC Mailing Address 5730 Corporate Way Suite 214 City State Zip Code West Palm Beach FL 33407 Transaction ID: SD10.4108 Outstanding Balance Beginning This Period 5995.39 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5995.39 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Timothy Baker Consulting, LLC political strategy consulting Mailing Address P. O. Box 424 City State Zip Code Tallahassee 32302 FL Outstanding Balance Beginning This Period Transaction ID: SD10.4111 5000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period

| Mailing Address | | | |
|--|-------|--------------------|---|
| City | State | Zip Code | |
| Outstanding Balance Beginning This Period | | | |
| Amount Incurred This Period | P | ayment This Period | Outstanding Balance at Close of This Period |
| | | | 1 |
| 9 9 | 7 | 9 | , , , , , , , , , , , , , , , , , , , |
| SUBTOTALS This Period This Page (optional) | | | 10995 39 |

0.00

Nature of Debt (Purpose):