04/06/2017 10 : 37

PAGE 1 / 7

FEC FORM 3	AND DIS		ECEIPTS EMENTS		o	office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRIN	т 🔻	Example: If typing	g, type	12FE4M5	
Lizbeth Benacquist	o for Congress					
ADDRESS (number and stree	610 S. Bouleva	ard				
Check if different than previously reported. (ACC)	 Tampa				FL 33	3606
2. FEC IDENTIFICATIO		CITY	L	5	STATE 🔺	ZIP CODE
C C00556241		3. IS THIS REPORT	× NEW (N)	OR	AMENDEI (A)	D STATE ▼ DISTRICT
July 15 Quarte		(b) 12-Day F	PRE-Election Repo Primary (12P) Convention (1 on		General (120 Special (125	
January 31 Ye	ar-End Report (YE)	(c) 30-Day F	OST-Election Rep	ort for the:	_	
Termination Re	eport (TER)	Election	General (30G	D D /	Runoff (30R)) Special (30S) in the State of
5. Covering Period	M M / D D /	7 Y Y Y Y 2017 Y	through	м_м 03	/ D D / 31	Y Y Y Y 2017
I certify that I have examine Type or Print Name of Trea	Watkins, Nar		v knowledge and k	oelief it is tri	ue, correct and c	complete.
Signature of Treasurer	Watkins, Nancy, H., ,		[Electronically I	Filed] D	Date	/ D D / Y Y Y Y 06 / 2017
NOTE: Submission of false, e	rroneous, or incomple	ete information m	ay subject the pers	son signing t	his Report to the	penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

		FEC Form 3 (Revised 05/2016)	of Receipts and Disbursements	PAGE 2 / 7
		or Type Committee Name eth Benacquisto for Congress		
R	lepor	t Covering the Period: From:	01 / D D / Y Y Y Y 01 / 2017 To:	M 03 / D D / Y Y Y Y 31 / 2017
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	, , 0.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	0.00
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	0.00
8.		sh on Hand at Close of porting Period (from Line 27)	4981.36	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	121325.68	

For further information contact:

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

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

Image#	20170	406905	2020411
iiiiaye#	201704	400903	2020411

	-		DETAILED SUMMARY PAGE of Receipts	PAGE 3/7
W	rite d	FEC Form 3 (Revised 05/2016) or Type Committee Name		
		eth Benacquisto for Congress		
_	-120			
Re	eport	Covering the Period: From:	M / D D / Y Y Y Y 1 01 2017	Fo: 03 / D D / Y Y Y Y 31 / 2017
		I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	COI	NTRIBUTIONS (other than loans) FROM:		
	(a)	Individuals/Persons Other Than		
		Political Committees	0.00	0.00
		(i) Itemized (use Schedule A)	, , , , , , , , , , , , , , , , , , , ,	, , , 0.00
		(ii) Unitemized	0.00	0.00
		(iii) TOTAL of contributions	0.00	0.00
		from individuals		
	(b)	Political Party Committees	0.00	0.00
	(c)	Other Political Committees (such as PACs)	0.00	0.00
	(d) (e)	The Candidate TOTAL CONTRIBUTIONS	0.00	0.00
	(0)	(other than loans)		
		(add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12.	TRA	NSFERS FROM OTHER		
	AUT	HORIZED COMMITTEES	0.00	0.00
13.	LOA	ANS:		
	(a)	Made or Guaranteed by the	0.00	
		Candidate	, , , , , , , , , , , , , , , , , , , ,	0.00
	(b)	All Other Loans	0.00	0.00
	(c)	TOTAL LOANS	0.00	0.00
		(add Lines 13(a) and (b))	7 7 *	7 7 7
14.		SETS TO OPERATING		
		PENDITURES Funds, Rebates, etc.)	0.00	0.00
			7 7 7 8 8 1	7 7 7 7 7 7 7
15.		IER RECEIPTS idends, Interest, etc.)	0.00	0.00
16				
10.	11(e	FAL RECEIPTS (add Lines a), 12, 13(c), 14, and 15) ry Total to Line 24, page 4)	0.00	0.00

of Disbursements FEC Form 3 (Revised 05/2016) COLUMN A **II. DISBURSEMENTS Total This Period** Ele 0.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 by the Candidate..... 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 Than Political Committees 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 (add Lines 20(a), (b), and (c)).....

 21. OTHER DISBURSEMENTS
 0.00

 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)
 0.00

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	Γ.	7		9	_	4981.36
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		9	_	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		,	_	4981.36
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7		,	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		,		4981.36

DETAILED SUMMARY PAGE

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

COLUMN B ection Cycle-to-Date	

					PAGE 5 OF 7
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	1e (check only one) X 13a
ME OF COMMITTEE (In Fuliiste for the second	,			Transac	tion ID : SC22
LOAN SOURCE Full Nam	•	dle Initial)		Memo Item	Election: 2014 Primary General
Mailing Address 610 S. Boulevard					✓ Other (specify) ▼ Special Primary 2014
City Tampa		State FL	ZIP Code 33606	e	X Personal Funds of the Candida
Original Amount of Loan	50000.00	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Peri 50000.00
TERMS Date Incurre M02 ^M / D07 ^D /		C 02 M / D 07 D	Date Due	Interest Rate (If none, enter 2020 Y 0.0	0)
List All Endorsers or Gua 1. Full Name (Last, First, I		Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, N	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, M	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	ay 1 1 ay 1 1 ay 1
4. Full Name (Last, First, M	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
UBTOTALS This Period This	Page (optional)			······	5000.00
OTALS This Period (last pag	e in this line only)			50000.00

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) Lizbeth Benacquisto A. Full Name (Last, First, Middle Initial) of De Public Concepts, LLC Mailing Address 5730 Corporate Way, #214	btor or Cre	ditor	(Use separate schedule(s) for each numbered line) Nature of D direct mail	PAGE 6 OF 7 FOR LINE NUMBER: (check only one) 9 x 10 Pebt (Purpose): services	
City West Palm Beach	State FL	Zip Code 33407			
Outstanding Balance Beginning This Period 36050.29 Amount Incurred This Period 0.00		Payment This Period		on ID : 39 ng Balance at Close of This Period 36050.29	
B. Full Name (Last, First, Middle Initial) of Del Public Concepts, LLC	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Concepts, LLC				
Mailing Address 5730 Corporate Way Suite 214 City West Palm Beach	State FL	Zip Code 33407			
Outstanding Balance Beginning This Period 7480.00 Amount Incurred This Period 0.00		Payment This Period 0.0		on ID : 40 ng Balance at Close of This Period 7480.00	
C. Full Name (Last, First, Middle Initial) of De Public Concepts, LLC Mailing Address 5730 Corporate Way, #214	ebtor or Cre	ditor	Nature of D voter conta	ebt (Purpose): act	
City	State	Zip Code			
West Palm Beach Outstanding Balance Beginning This Period 5995.39 Amount Incurred This Period 0.00	FL	Payment This Period	Outstandi	ion ID : 42 ng Balance at Close of This Period 5995.39	
 SUBTOTALS This Period This Page (optiona TOTALS This Period (last page this line num 	-			49525.68	
3) TOTAL OUTSTANDING LOANS from Schedu		<u> </u>			
4) ADD 2) and 3) and carry forward to appropr	iate line of \$	Summary Page (last page or		· · · · · · · · · · · · · · · · · · ·	

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) Lizbeth Benacquisto 1	for Co	naress	(Use separate schedule(s) for each numbered line)	PAGE 7 OF 7 FOR LINE NUMBER: (check only one) 9 X 10
A. Full Name (Last, First, Middle Initial) of De Gula Graham			Nature of D fundraising	ebt (Purpose): consulting
Mailing Address 499 S. Capitol Street, S.W.,	#420			
City Washington	State DC	Zip Code 20003		
Outstanding Balance Beginning This Period			Transactio	on ID : 44
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 Del Timothy Baker Consulting, LLC		tor		ebt (Purpose): ategy consulting
Mailing Address P. O. Box 424				
City Tallahassee	State FL	Zip Code 32302		
Outstanding Balance Beginning This Period 5000.00 Amount Incurred This Period		Payment This Period		ng Balance at Close of This Period
0.00		0.0	JU	5000.00
C. Full Name (Last, First, Middle Initial) of De	ebtor or Cred	litor	Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optiona	I)		···· •	21800.00
2) TOTALS This Period (last page this line num	ber only)		···· •	71325.68
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last pa	age only)		50000.00
4) ADD 2) and 3) and carry forward to appropr	iate line of S	ummary Page (last page or	nly) 🕨	121325.68

FEC	Schedule	D	(Form	3)	(Revised	05/2016)
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