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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Cor			Office I	Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN	•	example: If typing, to	ype 12FE	14M5	
Lizbeth Benacqui	sto for Congress					1
1						
	ı 610 S. Bouleva					
ADDRESS (number and st						
Check if differe	nt					
than previously reported. (ACC)	Tampa			FL	33606	
2. <b>FEC IDENTIFICAT</b>	ION NUMBER ▼	CITY		STATE A		ZIP CODE
C C00556241		3. IS THIS	✓ NEW	ПА	MENDED	STATE ▼ DISTRICT
C C00330241		REPORT		OR U		FL 19
4. TYPE OF REPO	RT (Choose One)	(b) 12-Day <b>PR</b>	<b>E</b> -Election Report f	or the:		
(a) Quarterly Report	ts:	(, , , , , , , , , , , , , , , , , , ,			eral (12G)	Runoff (12R)
April 15 Qu	arterly Report (Q1)		Primary (12P)		, ,	Rulloll (12h)
July 15 Qua	arterly Report (Q2)	Ш	Convention (12C	Spe	cial (12S)	
X October 15	Quarterly Report (Q3)	Election o		D / Y Y	YY	in the State of
January 31	Year-End Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Report	for the:		
			General (30G)	Run	off (30R)	Special (30S)
Termination	Report (TER)	Election o	n	) D / Y Y	YY	in the State of
5. Covering Period	M M / D D /	2015	through	M M / D 30		015 Y
I certify that I have exam	nined this Report and to	o the best of my l	knowledge and beli	ef it is true, corre	ct and comp	plete.
Type or Print Name of To	reasurer Nancy H. Wa	ıtkins				
Signature of Treasurer	Nancy H. Watkins		[Electronically Filed	d] Date	M M / D	02 /
NOTE: Submission of false	e, erroneous, or incomple	ete information ma	y subject the person	signing this Repo	rt to the pena	alties of 2 U.S.C. §437g.
Office Use Only						<b>EC FORM 3</b> evised 02/2003)

### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

#### Lizbeth Benacquisto for Congress

R	eport Cove	ering the Period: From:	07 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Cont	ributions (other than loans)		
	(-)	Contributions or than loans) (from Line 11(e))	0.00	2050.00
	` '	Contribution Refunds	0.00	0.00
		Contributions (other than loans) tract Line 6(b) from Line 6(a))	0.00	2050.00
7.	Net Oper	ating Expenditures		
	. ,	Operating Expenditures	0.00	57.64
		Offsets to Operating enditures (from Line 14)	0.00	0.00
		Operating Expenditures tract Line 7(b) from Line 7(a))	0.00	57.64
8.		Hand at Close of Period (from Line 27)	5199.12	
9.	the Com	d Obligations Owed <b>TO</b> mittee (Itemize all on C and/or Schedule D)	0.00	
10.	the Com	d Obligations Owed <b>BY</b> mittee (Itemize all on 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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

#### Lizbeth Benacquisto for Congress

07 09 2015 01 2015 30 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 2050.00 (ii) Unitemized..... (iii) TOTAL of contributions 0.00 2050.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 Candidate.....

14.	OFFSETS TO OPERATING
	EXPENDITURES

TOTAL LOANS

(Refunds, Rebates, etc.) .....

All Other Loans.....

(add Lines 13(a) and (b)).....

15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....

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2050.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	57.64
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed 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))	0.00	0.00
 20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	57.64
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	5199.12
:4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
5.	SUBTOTAL (add Line 23 and Line 24)		5199.12
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	0.00
7.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	5199.12

#### SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

×	13a
	13b

Detailed Summary Page Transaction ID: SC28 NAME OF COMMITTEE (In Full) Lizbeth Benacquisto for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Lizbeth Benacquisto General X Other (specify) Mailing Address 610 S. Boulevard Special Primary 2014 City State ZIP Code FL 33606 Tampa Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 07 <sup>M</sup> 02<sup>M</sup> ž014 <sup>M</sup>02 2016 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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)

PAGE 6 OF FOR LINE NUMBER:

	9
X	10

Excluding Loans			numbered line)	(Check only one)	X 10
NAME OF COMMITTEE (In Full)					
Lizbeth Benacquisto for	r Congr	ess			
A. Full Name (Last, First, Middle Initial) of Debtor Public Concepts, LLC	r or Creditor		Nature of D direct mail	ebt (Purpose): services	
Mailing Address 5730 Corporate Way, #214					
City State West Palm Beach	Zip Code FL	33407			
Outstanding Balance Beginning This Period 36050.29			Transacti	on ID : 40	
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of	This Period
0.00		0	.00	360	50.29
B. Full Name (Last, First, Middle Initial) of Debtor Public Concepts, LLC  Mailing Address 5730 Corporate Way	or Creditor		Nature of D website de	Debt (Purpose): usign	
Suite 214					
City State West Palm Beach	Zip Code FL	33407			
Outstanding Balance Beginning This Period			Transacti	on ID : 41	
7480.00					
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of	This Period
0.00	7	0	.00	74	80.00
C. Full Name (Last, First, Middle Initial) of Debto Public Concepts, LLC	r or Creditor		Nature of D voter conta	Debt (Purpose): act	
Mailing Address 5730 Corporate Way, #214					
City West Palm Beach	State FL	Zip Code 33407			
Outstanding Balance Beginning This Period 5995.39			Transact	ion ID : 43	
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of	This Period
0.00		C	0.00	59	95.39
1) SUBTOTALS This Period This Page (optional)			> [	495	525.68
2) TOTALS This Period (last page this line number	only)			7	
3) TOTAL OUTSTANDING LOANS from Schedule (	C (last page only	·)		, , , , , , , , , , , , , , , , , , , ,	

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)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Timothy Baker Consulting, LLC		Nature of Debt (Purpose): political strategy consulting
Mailing Address P. O. Box 424		
City State Tallahassee	Zip Code FL 32302	
Outstanding Balance Beginning This Period 5000.00		Transaction ID: 44
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5000.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Gula Graham		Nature of Debt (Purpose): fundraising consulting
Mailing Address 499 S. Capitol Street, S.W., #420		
City State Washington	Zip Code DC 20003	
Outstanding Balance Beginning This Period		Transaction ID : 60
16800.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	16800.00
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, ,		
SUBTOTALS This Period This Page (optional)		21800.00
TOTALS This Period (last page this line number only)		71325.68
	50000.00	
TOTAL OUTSTANDING LOANS from Schedule C	Mast Dade Only)	