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PAGE 1 / 7

FEC FORM 3	AND	_	RECEIPT SEMENT Committee	_	C	Office Use Only
1. NAME OF COMMITTEE (in	TYPE OR full)	PRINT 🔻	Example: If ty over the lines.		12FE4M5	
Lizbeth Benaco	quisto for Congr	ess		<u> </u>		
ADDRESS (number and	d street)	oulevard				
Check if diff than previou reported. (A	Isly Tampa				FL 3	3606
2. FEC IDENTIFIC	ATION NUMBER V	CIT	Y 🔺		STATE 🔺	ZIP CODE
C C0055624		3. IS TH REPO	~	EW) OR	AMENDE (A)	D STATE ▼ DISTRICT
(a) Quarterly Re April 15 July 15 Coctober January	PORT (Choose One) eports: Quarterly Report (Q1) Quarterly Report (Q2) 15 Quarterly Report (31 Year-End Report (tion Report (TER)	Q3) Elect ′E) (c) 30-Da	ay PRE -Election Re Primary (1 Convention ion on ay POST -Election F General (3	2P) n (12C) / DDD Report for the	General (120 Special (125	S) in the State of
5. Covering Period	Watkin	1 / Y Y Y 1 2016	Y throug			Y Y Y Y 2016 complete.
Type or Print Name of Signature of Treasure	Watkins, Nancy,	Н., ,	[Electronical	lly Filed]	Date	/ D D / Y Y Y Y 03 / 2016
NOTE: Submission of f	alse, erroneous, or inc	omplete informatio	n may subject the p	person signing	g this 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
	Vrite or Type Committee Name Lizbeth Benacquisto for Congres	55	
R	Report Covering the Period: From:	M M / D D / Y Y Y Y 01 / 2016 To:	M 09 / D D / Y Y Y Y 30 / 2016
		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	2050.00
	(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	2050.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	. 0.00	275.40
	(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	275.40
8.	Cash on Hand at Close of Reporting Period (from Line 27)	4981.36	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule 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

	EC Form 3 (Revised 05/2016)	ETAILED SUMMARY PAGE of Receipts	PAGE 3 / 7
W	Vrite or Type Committee Name		
L	Lizbeth Benacquisto for Congress		
R	Report Covering the Period: From:	To:	M M / D D / Y Y Y Y 09 30 2016
	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	0.00	0.00
	(i) Itemized (use Schedule A)	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	(ii) Unitemized	0.00	2050.00
	(iii) TOTAL of contributions from individuals	0.00	2050.00
		1 1 7 1 1 7 1 1 M 1	
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
			0.00
	(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	7 7 7
	(other than loans)		
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	2050.00
12.	TRANSFERS FROM OTHER		
	AUTHORIZED COMMITTEES	0.00	0.00
13	LOANS:		
10.	(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
14.	OFFSETS TO OPERATING		
	EXPENDITURES	0.00	0.00
	(Refunds, Rebates, etc.)	y y x	
15.	OTHER RECEIPTS	0.00	0.00
	(Dividends, Interest, etc.)	0.00	0.00
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	2050.00

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FEC Form 3 (Revised 05/2016)

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4/7

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17. OPERATING EXPENDITURES	0.00	275.40		
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 (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(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	275.40		

III. CASH SUMMARY

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

					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 se	,			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 f	or Co	naress	(Use separate schedule(s) for each numbered line)	PAGE 6 OF 7 FOR LINE NUMBER: (check only one) 9 X 10	
A. Full Name (Last, First, Middle Initial) of De Public Concepts, LLC		<u> </u>	Nature of D direct mail	ebt (Purpose): services	
Mailing Address 5730 Corporate Way, #214					
City West Palm Beach	State FL	Zip Code 33407			
Outstanding Balance Beginning This Period			Transactio	on ID : 40	
36050.29 Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00			00	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			ebt (Purpose): sign	
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		Payment This Period		Transaction ID : 41 Outstanding Balance at Close of This Period	
0.00		, , , , , , , , , , , , , , , , , , , ,	00	7480.00	
C. Full Name (Last, First, Middle Initial) of De Public Concepts, LLC	ebtor or Credit	ior		Nature of Debt (Purpose): voter contact	
Mailing Address 5730 Corporate Way, #214					
City West Palm Beach	State FL	Zip Code 33407			
Outstanding Balance Beginning This Period 5995.39		33407	Transact	ion ID : 42	
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		, 0.0		5995.39	
1) SUBTOTALS This Period This Page (optional)			49525.68	
2) TOTALS This Period (last page this line num) TOTALS This Period (last page this line number only)				
3) TOTAL OUTSTANDING LOANS from Schedu) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropr	nly) 🕨				

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

SCHEDULE D (FEC Form 3)			(Use separate	PAGE 7 OF 7
DEBTS AND OBLIGATIONS Excluding Loans	schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 10		
NAME OF COMMITTEE (In Full)				
Lizbeth Benacquisto f	or Co	ongress		
A. Full Name (Last, First, Middle Initial) of De Gula Graham	btor or Cre	ditor	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			00	16800.00
B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	litor	Nature of D	ebt (Purpose):
Timothy Baker Consulting, LLC	2			ategy consulting
Mailing Address P. O. Box 424				
City Tallahassee	State FL	Zip Code 32302		
Outstanding Balance Beginning This Period		32302	Transactio	on ID · 46
5000.00				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	5000.00
C. Full Name (Last, First, Middle Initial) of De	btor or Cre	ditor	Nature of D	ebt (Purpose):
Mailing Address				
	1			
City	State	Zip Code		
Outstanding Balance Beginning This Period	1			
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
		9 9 9		7
1) SUBTOTALS This Period This Page (optional)		···· •	21800.00
2) TOTALS This Period (last page this line number only)			71325.68	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				50000.00
4) ADD 2) and 3) and carry forward to appropri	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			121325.68