

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ron Culp
Name

(2) 298 Norwood Ave
Address (number and street)

SAT Bch FL 32937
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 9 / 21 / 26 To 10 / 04 / 26 Report Type: 2026 G4

☐ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 150 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 43 . 66

Transfers to Office Account \$ _____ , 2 , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 850 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 067 . 16

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Ronald S Culp
☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

Ronald S Culp
Signature

(Type name) Ronald S Culp
☒ Candidate ☐ Chairperson (only for PC and PTY)

Ronald S Culp
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Row Cup (2) I.D. Number _____

(3) Cover Period 9 / 21 / 26 through 10 / 04 / 26 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
9, 28, 26	HALL MARVIN 21928 VERA BLVD FAIRHOPE, AL 36532	I	RET	CHE			\$150.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

(1) Name Row Culp (2) I.D. Number _____
(3) Cover Period 9/21/26 through 10/04/26 (4) Page 1 of 1

[illegible]

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

09-25-26 P01:52 IN

(1) Rou Culp

Name

(2) 298 Norwood Av

Address (number and street)

SAT Bch FL 32937

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 9 / 5 / 26 To 9 / 18 / 26 Report Type: 2026G3

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, 400.⁰⁰

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.⁰⁰

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 1,710.⁰⁰

(10) TOTAL Monetary Expenditures To Date

\$ _____, 1,023.⁵⁰

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name)

Ronald S Culp

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Ronald S Culp
Signature

(Type name)

Ronald S Culp

☐ Candidate ☐ Chairperson (only for PC and PTY)

X Ronald S Culp
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Row Cup (2) I.D. Number _____

(3) Cover Period 9 / 5 / 26 through 9 / 18 / 26 (4) Page 1 of 1

(5) Date	(7) Full Name	(8) Contributor	(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Type Occupation	Type	Description		
9 / 16 / 26	JESSICA ROSS	I	SCCU			
1	1351 GLEN EAGLES WAY ROCKLEDGE FL 32955	EXEC ASSISTANT	CHE			200. ⁰⁰
9 / 17 / 26	CRESSANTA	I				
2	KATHY 610 MAR BRISACT SAT Bch FL 32937	RETIRED	CHE			200. ⁰⁰
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY
09-10-26 P03:02 IN

(1) Ron Culp
Name

(2) 298 Norwood Ave
Address (number and street)

SAT Bch FL 32937
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 22 / 26 To 9 / 4 / 26 Report Type: 2026 G2

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 50 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 1 , 016 . 50

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , 1 , 016 . 50

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 300 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 023 . 50

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name)

Ronald S Culp

☐ Individual (only for IE or electioneering comm.)

☒ Treasurer

☐ Deputy Treasurer

X

Ronald S Culp

Signature

(Type name)

Ronald S Culp

☒ Candidate

☐ Chairperson (only for PC and PTY)

X

Ronald S Culp

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Row Culp (2) I.D. Number _____

(3) Cover Period 8 / 22 / 26 through 9 / 04 / 26 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
8 / 26 / 26	JOHNSON, GARY	I		CHE			50.00
1	759 MONTELEONE SAT Bldg Rm 32537						
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES
(1) Name Ray Culp (2) I.D. Number _____

(2) I.D. Number _____

(4) Page 1 of 1

[illegible]

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ron Culp
Name

(2) 298 Norwood Ave
Address (number and street)

SAT Bch FL 32937
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 14 / 26 To 8 / 21 / 26 Report Type: 2026 G1

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 700 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0 . 0

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 250 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 7 . 00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Ronald S Culp

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Ronald S Culp
Signature

(Type name) Ronald S Culp

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Ronald S Culp
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Row Culp (2) I.D. Number _____

(3) Cover Period 8 / 14 / 26 through 8 / 21 / 26 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
8, 14, 26	MARGUT, PAM	I	HF Nurse	CHE			\$500.00
1	309 N. W. 1st Ave SAT Bldg Rm 3233						
8, 21, 26	GASKINS, JOHN	I	RETIRED	CHE			\$200.00
2	2410 W. TEXAS AVE TAMPA, FL 33629						
~~8, 1, 1~~							
1, 1							
1, 1							
1, 1							
1, 1							

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) RONALD S CULP
Name
(2) 298 NORWOOD AVE
Address (number and street)
SAT Bch FL 32937
City, State, Zip Code

OFFICE USE ONLY

08-14-26 A01:16 IN 

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 7 / 31 / 26 To 8 / 13 / 26 Report Type: 2026P7

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, 5 , 50 . 00

Loans \$, , .

Total Monetary \$, , .

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , 7 . 00

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 5 , 50 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 7 . 00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) RONALD S CULP
☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Ronald S Culp
Signature

(Type name) RONALD S CULP
☒ Candidate ☐ Chairperson (only for PC and PTY)

X Ronald S Culp
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name RONALD S Culp (2) I.D. Number _____

(3) Cover Period 7 / 31 / 26 through 8 / 13 / 26 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
7, 31, 26	COTE, LIONEL	I		CHE			\$100.00
1	609 GRANT CT SAT Bch FL 32937						
8, 4, 26	McKEOWN, KEVIN	I		CHE			\$100.00
2	604 BARCELONA CT SAT Bch FL 32937						
8, 8, 26	ALBRITTON, GARY	I	City of ST PETE Employee	CHE			\$300.00
3	290 NORWOOD AV SAT Bch FL 32937						
8, 10, 26	LARRY MELKONIAN	I		CHE			\$50.00
4	SUSAN NICHOLS 2555 PDS MAPLE PL MELB, FL 32937						
1 / 1							
1 / 1							
1 / 1							

(1) Name RONALD S CUP (2) I.D. Number _____

(3) Cover Period 7/31/26 through 8/13/26 (4) Page 1 of 1

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES