

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Louis Duval
 Name
1270 Oregon Lane
 Address (number and street)
North Port, Florida 34286
 City, State, Zip Code

OFFICE USE ONLY
 CITY CLERK
 3 SEP'24 PM 1:04:55
 CITY OF NORTH PORT

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City Commission Seat 3
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 07 / 27 / 2024 To 08 / 02 / 2024 Report Type: P6

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 34 . 00

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

Total Monetary \$ _____ , _____ , 34 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 050 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 330 . 10

(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) David Louis Duval

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

X *David Louis Duval*
 Signature

(Type name) David Louis Duval

Candidate Chairperson (only for PC and PTY)

X *David Louis Duval*
 Signature