

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Louis Duval
 Name
 (2) 1270 Oregon Lane
 Address (number and street)
North Port, Fl. 34286
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
 22 OCT'24PM1:19:24
 CITY OF NORTH PORT
 CITY CLERK

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: City Commission District 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 10 / 05 / 2024 To 10 / 18 / 2024 Report Type: G5

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 92 . 00

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

Total Monetary \$ _____ , _____ , 92 . 00

(8) Other Distributions
 \$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date
 \$ _____ , 2 , 475 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , 2 , 092 . 48

(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

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name David Louis Duval

(2) I.D. Number _____

(3) Cover Period 10 / 05 / 2024 through 10 / 18 / 2024

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
10 / 05 / 2024	Reich, Jake 1314 East Venice Ave., Venice, Fl. 34285	Table Space at Shop Local North Port. Check number 1014.	CAN		\$25.00
1					
10 / 05 / 2024	25 Bobcat Village Cntr.Rd., North Port, Fl. 34288	Snacks at Shop Local event.	CAN		\$19.00
2					
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