CAMPAIGN TREASURER'S REPORT SUMMARY	
1) DOB DANIELS	OFFICE USE ONLY
(2) Name (2) Name (2) CIELO Court	
Address (number and street)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City, State, Zip Code	
Check here if address has changed	(3) ID Number:
(4) Check appropriate box(es): Candidate Office Sought: Conce (it / Council Sect Committee (PC) 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 06/01/16 To 06/24/16 Report Type: 20/67/	
	cial Election Report
(6) Contributions This Report	(7) Expenditures This Report Monetary
Cash & Checks \$	Expenditures \$ O, O, O
Loans \$ <u>0</u> , <u>0</u> , <u>6</u> . <u>0</u>	Transfers to Office Account \$ \(\) , \(\) , \(\)
Total Monetary \$ 0, 0, 0.0	
In-Kind \$ 0, 6, 0.0	Total Monetary \$,
	(8) Other Distributions \$ O , O , O .
(9) TOTAL Monetary Contributions To Date \$ 0.00.00	(10) TOTAL Monetary Expenditures To Date
(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) NANCY K. DANIELS	(Type name) BOB DANIELS
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate
x Mary RD oniels	× Holles
Signature	Signature