| Yamilay E YBOAEM a HEW JEASST | LMB (A. St. Sp. SOF C.) STOLING 120ff | | | |
|--|---|--|--|--|
| FLORIDA DEPARTMENT OF S CAMPAIGN TREASUR | STATE DIVISION OF ELECTIONS ER'S REPORT SUMMARY | | | |
| (1) Bob DANIELS Name (2) 1/02 CIELO CT Address (number and street) North Venice FL 34276 City, State, Zip Code | OFFICE USE ONLY CLERK 245EP'13 AM 8:45 | | | |
| ☐ CHECK IF ADDRESS HAS CHANGED (4) Check appropriate box(es): ☐ Candidate (office sought): ☐ Political Committee ☐ Committee of Continuous Existence ☐ Party Executive Committee ☐ Electioneering Communication | (3) ID Number: City Counsil, Seat 6 CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED | | | |
| | T IDENTIFIERS 9 09 / 16 / 20) 3 Report Type TR on Report | | | |
| (6) CONTRIBUTIONS THIS REPORT Cash & Checks \$ | (7) EXPENDITURES THIS REPORT Monetary Expenditures \$ 130. — Transfers to Office Account \$ Total Monetary \$ 150. — | | | |
| (9) TOTAL Monetary Contributions To Date | (8) Other Distributions \$ (10) TOTAL Monetary Expenditures To Date \$ 150 - | | | |
| (11) CER¹ | TIFICATION rson to falsify a public record (ss. 839.13, F.S.) | | | |
| Correct, and complete. (Type name) Nancy K Paviers [Individual (only for electioneering commun.) X Mancy K, Daniel Signature DS-DE 12 (Rev. 08/04) | I certify that I have examined this report and it is true, correct, and complete. (Type name) BOB DAN IELS (Type name) BOB DAN IELS (Candidate Charperson (only for PC, PTY & electionsering commun. organization) X BOB DAN IELS (Signature Charperson (only for PC, PTY & electionsering commun. organization) | | | |

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

| | 08/08/2013 | | ıgh <i>09</i> / | | I.D. Number 2/3 ₍₄₎ Page | | of / |
|------------------------------|--|--------|--|--|---|---|-----------------|
| (5) Date (6) Sequence Number | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | , A. | (8) ontributor Occupation | (9) Contribution Type | (10) In-kind Description | (11) | (12) |
| 08,08,13 | DANIELS, BOB 1102 CIELOCT N. Venice, FL 34275 | I | | LOA | | | 100 |
| 08, 30,13 2 | DANIELS, BOB 1102CIELO C+ N. Venice,FL 34275 | I | 6 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | LOA | | m f alf e all and latteral | \$ 50 |
| | i sie egwel il i sie egwel il i sie egwel il i sie egwel in se dir i sie egwel il se di | | | AND THE PROPERTY OF THE PROPER | | 18-18-18-18-18-18-18-18-18-18-18-18-18-1 | |
| | 07 - 40 <u>20 ml</u> | | fine prisent | enico seo es enico seo es | не при пбеза ин женичес, с | dus min | en. |
| | purce e admidd Lenis itt | SEMA. | 8 F' - | ermes horse o | en fallster Smith a ganti | ar ub esy | rmig |
| | | | | | oligina pera t nemograpia pro no estrono tro Materia oritari | | įΩ _i |
| | ne op het som henre Frank en er pakents a ligtfant om henre en s | | THE LIFT LIFT CO. | edimin structures and services are services and services are services and services and services and services and services are services are services and services are services and services are services and services are services are services and services are services | | III. Spilito III. Huse Igira Huse Igira, 201 | |
| | | 10 290 | | | e emilione e de Contracto de la contracto de l | | F GETY |
| DS-DE 13 (Rev. 08/03) | SI | EE REV | ERSE FOR IN | STRUCTIONS A | ND CODE VALU | IFS | |

| (1) Name | | 2) I.D. Numbe | | PART CARL | |
|------------------------------|--|--|--|--------------|---|
| (3) Cover Perio | d 09 108 12013 through 09 | 16,2013 | 4) Page | of _ | 1 |
| (5) Date (6) Sequence Number | (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) | (11) |
| 08/08/13 | City of Venue 401 W Venue are. Venue FL 34285 | Bualifying Fee | mon | | 102- |
| 09/12/13 | BOB DANIELS 1102 CIELO C+ N. Venice, FL 34275- 2222 | Payment of LOAN | Dis | B III S | 48 |
| // | | | | | |
| // | | | | | Larra, Larra, Larra, Larra, Larra, Larra, La |
| // | Ting Minth Income | IEIEILI | as, team the | | 12. |
| // | | - 1-Creje, Skilik ov Miskil or Turk i ure | understanding on status are to save the pro- | | reme (II) |
| | | Alland mid days to St. sa mira | are per met | Mary william | |
| 7 / | | The state of the s | | | T Ayo na wad 11 hofin 1 hifem |