

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) BOB DANIELS
 Name

(2) 1102 CIELO CT.
 Address (number and street)

NORTH VENICE, FL 34275
 City, State, Zip Code

OFFICE USE ONLY

AUG 5 '19 AM 8:44

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY COUNCIL SEAT 7 - MAYOR
- 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 07 / 01 / 2019 To 07 / 31 / 2019 Report Type: 2019 M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 600.00

Loans \$ _____ , _____ , 0.00

Total Monetary \$ _____ , _____ , 600.00

In-Kind \$ _____ , _____ , 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 192.60

Transfers to Office Account \$ _____ , _____ , 0.00

Total Monetary \$ _____ , _____ , 192.60

(8) Other Distributions

\$ _____ , _____ , 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 23,480.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 3,820.03

(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) BERNIE PAPPAS

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

X Bernie Pappas
 Signature

(Type name) ROBERT DANIELS

Candidate Chairperson (only for PC and PTY)

X Robert Daniels
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name BOB DANIELS (2) I.D. Number _____

(3) Cover Period 07 / 01 / 2019 through 07 / 31 / 2019 (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
(6) Sequence Number		Type	Occupation				
07 / 24 / 2019 1	MARTY'S MOBILE HOME PARK 557 SW CUTOFF WORCESTER, MA 01607	B	MOBILE HOME PARK MANAGEMENT	CHE			400.00
07 / 24 / 2019 2	STELWOK, PAMELA 1194 CIELO CI. NO 2TH AVENUE, FL 34275	I	RETIRED	CHE			200.00
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name BOB DAVIELS (2) I.D. Number _____

(3) Cover Period 07 / 01 / 2019 through 07 / 31 / 2019 (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					
07/24/2019	VENICE PRINT CENTER 2021 S. TAMIAWI TRAIL VENICE, FL 34293	CAR MAGNETS	MDN		192.60
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