

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Louis Duval

Name

(2) [REDACTED]

Address (number and street)

North Port, FL 34286

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

CITY CLERK

12 SEP'24 PM 2:06:48

CITY OF NORTH PORT

(4) Check appropriate box(es):

☒ Candidate Office Sought: City Commission District 3

☐ 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 08 / 24 / 2024 To 09 / 06 / 2024 Report Type: G2

☐ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 170 . 00

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

Total Monetary \$ _____ , _____ , 170 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 075 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 552 . 71

(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 08 / 24 / 2024 through 09 / 06 / 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					
08 / 24 / 2024	Reich, Jake 1314 East Venice Ave., Venice, Fl. 34285	Table Space at Shop Local North Port. Check number 1008.	CAN		\$25.00
1					
08 / 24 / 2024	25 Bobcat Village Cntr.Rd., North Port, Fl. 34288	Snacks at Shop Local event.	CAN		\$20.00
2					
08 / 27 / 2024	Truist Bank Campaign Account 5900 N. Port Blvd., North Port, Fl. 34287	Withdrawal to cover Petty Cash spending	PCW		\$100.00
3					
08 / 31 / 2024	Reich, Jake 1314 East Venice Ave., Venice, Fl. 34285	Table Space at Shop Local North Port. Check number 1009.	CAN		\$25.00
4					
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