

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Louis Duval

Name

(2)

Address (number and street)

North Port, FL 34286

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number:

OFFICE USE ONLY

10/11/24
1:05 pm

(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 09 / 21 / 2024 To 10 / 04 / 2024 Report Type: G4

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, , .

Loans \$, , 400 00

Total Monetary \$, , 400 00

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , 37 00

Transfers to Office Account \$, , .

Total Monetary \$, , 37 00

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, , 2 475 00

(10) TOTAL Monetary Expenditures To Date

\$, , 2 000 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 CONTRIBUTIONS

(1) Name David Louis Duval (2) I.D. Number _____

(3) Cover Period 09 / 21 / 2024 through 10 / 04 / 2024 (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
09 / 30 / 2024	Duval, David, Louis [REDACTED] North Port, FL 34286	S	Retired	Loa			\$400.00
1							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name David Louis Duval

(2) I.D. Number _____

(3) Cover Period 09 / 21 / 2024 through 10 / 04 / 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					
09 / 21 / 2024	Reich, Jake 1314 East Venice Ave., Venice, Fl. 34285	Table Space at Shop Local North Port. Check number 1014.	CAN		\$25.00
1					
09 / 21 / 2024	25 Bobcat Village Cntr.Rd., North Port, Fl. 34288	Snacks at Shop Local event.	CAN		\$12.00
2					
/ /					
/ /					
/ /					
/ /					
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