

## 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

1 NOV 24 AM 8:15:39

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 10 / 19 / 2024 To 10 / 31 / 2024 Report Type: G 6

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-Kind \$ \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, 89 .00

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, 89 .00

### (8) Other Distributions

\$ \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 2 , 475 .00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 2 , 181 .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 EXPENDITURES

(1) Name David Louis Duval

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 19 / 2024 through 10 / 31 / 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					
10 / 19 / 2024	Reich, Jake 1314 East Venice Ave., Venice, Fl. 34285	Table Space at Shop Local North Port. Check number 1013.	CAN		\$25.00
1					
10 / 19 / 2024	25 Bobcat Village Cntr.Rd., North Port, Fl. 34288	Snacks at Shop Local event.	CAN		\$23.00
2					
10 / 26 / 2024	Reich, Jake 1314 East Venice Ave., Venice, Fl. 34285	Table Space at Shop Local North Port. Check number 1015.	CAN		\$25.00
3					
10 / 26 / 2024	25 Bobcat Village Cntr.Rd., North Port, Fl. 34288	Snacks at Shop Local event.	CAN		\$16.00
4					
/ /					
/ /					
/ /					
/ /					