CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Dale D. Davis	OFFICE USE ONLY							
90 30	Name	ONLINE SUBMISSION							
(2)	1612 Mitchell Street #2	Submitted on:							
	Address (number and street) Melbourne, FL 32901	7/25/2014 13:24:19 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 517							
(4)	Check appropriate box(es):	(-)							
	Candidate Office Sought: School Board, District 5 Political Committee (PC) Electioneering Communications Org. (ECO)								
	(5) Report	dentifiers							
Cove	er Period: From 7 / 5 / 2014 To								
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$, , 0 . 00	Monetary							
Loan		Transfers to Office Account \$, , 0 . 00							
Total	Monetary \$, , 0 . 00	Total Monetary \$, , 0 . 00							
In-Ki	nd \$,, <u>29</u> . <u>99</u>								
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(Ty	(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) Individual (only for IE								
X Sic	onature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Dale D. Davis			- F	(2) I.D. Numbe	er <u>5</u>	17
(3) Cover Perio	7/5/2014 od///	thro	ough	/18/2014 //	(4) Pag	je <u>1</u>	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	5.20	(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
7/15/2014	Davis, Dale D 1612 Mitchell Street #2 Melbourne, Fl 32901		candidate	IK	website fee		\$29.9
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1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	ale D.	Davis					 (2) I.D. Num	nber	Ę	517	30
	7	/5/20	14		7/18/2	014	**				
(3) Cover Per	riod		_/_	through_	1	1	 (4) Page	1	of	0	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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