

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jason Lynn Stoltzfus
 Name
 (2) 4254 Flamingo Blvd
 Address (number and street)
Port Charlotte, FL 33948
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1069090]

Submitted on:
 7/24/2014 20:33:49 (eastern)

Check here if address has changed

(3) ID Number: 422

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner District 4
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 6 / 21 / 2014 To 7 / 4 / 2014 Report Type: P2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, -1 , 800 . 00

Loans \$, , 0 . 00

Total Monetary \$, -1 , 800 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 1 , 800 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 1 , 800 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 4 , 270 . 89

(10) TOTAL Monetary Expenditures To Date

\$, 4 , 365 . 95

(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 or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Jason Lynn Stoltzfus (2) I.D. Number 422

6/21/2014 through 7/4/2014

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
6/27/2014 / /	Monarch Printing, 1264 Market Circle # 6 Port Charlotte, fl 33953	B	refund of loan printer	CH		Add	\$-1,000.00
1							
7/1/2014 / /	Business Management Consultant, 200 Riviera CT Punta Gorda, fl 33950	B	consultant refund of loan	CH		Add	\$-300.00
2							
7/2/2014 / /	Johnston, David 200 Riviera Court Punta Gorda, fl 33950	I	analyst refund of loan	CH		Add	\$-500.00
3							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jason Lynn Stoltzfus

(2) I.D. Number 422

(3) Cover Period 6/21/2014 through 7/4/2014

(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					
6/27/2014 / /	Monarch Printing, 1264 Market Circle # 6 Port Charlotte, FL 33953	refund loan	RE	Delete	\$-1,000.00
1					
7/1/2014 / /	Business Management Consultant, 200 Riviera Court Punta Gorda, FL 33950	refund loan	RE	Delete	\$-300.00
2					
7/2/2014 / /	David Johnston, 200 Riviera Court Punta Gorda, FL 33950	refund loan	RE	Delete	\$-500.00
3					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					