CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Jason Lynn Stoltzfus	OFFICE USE ONLY								
(-)	Name	ONLINE SUBMISSION								
(2)	4254 Flamingo Blvd	Submitted on:								
	Address (number and street)	8/10/2014 17:47:42 (eastern)								
	Port Charlotte, FL 33948									
	City, State, Zip Code	(2) 17 11 1								
	Check here if address has changed	(3) ID Number: 422								
(4)	Check appropriate box(es):									
	Candidate Office Sought: County Commis	sioner 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	☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
(5) Report Identifiers										
Cove	er Period: From 8 / 2 / 2014 To	8 / 8 / 2014 Report Type: P6								
X O	riginal Amendment Spo	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(-)		Monetary								
Cash	n & Checks \$, , 0 . 00	Expenditures \$, , 118 . 47								
Loar	ns \$,,,000	Transfers to								
		Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , ,0 . <u>00</u>									
		Total Monetary \$, , <u>118</u> . <u>47</u>								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions								
		\$, , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>4</u> , <u>982</u> . <u>22</u>								
(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:										
_(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		×								
-	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jason Lynn Stoltzfu	s			2) I.D. Numbe	er4	22
	8/2/2014		8	/8/2014			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	je	of
		T.		1	Г	T	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)				Date: ProtestateD		
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	Amazint
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jason	Lynn	Sto	ltzfu	ıs			 (2) I.D. Nun	nber	4	422	300
	8/2/	2014	4		8/8/20	14	*	-			
(3) Cover Period	1		1	through	1	1	(4) Page	1	of	1	

(5)	(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
8/5/2014	Race Trac 151 , Punta Gorda, FL	travel gasoline	MO		\$66.09
1					
8/8/2014	Race Trac 95, 1520 El Jobean Road Port Charlotte, FL 33948	travel gasoline	MO		\$18.16
8/5/2014	Lowes Home Center, 2000 Tamiami Trail Port Charlotte, FL 33948	sign installation material	МО		\$34.22
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