

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Michael Morris  
 Name  
 (2) 21173 Midway Blvd  
 Address (number and street)  
Port Charlotte, FL 33952  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1111974]  
 Submitted on:  
 7/12/2016 10:31:58 (eastern)

Check here if address has changed (3) ID Number: 451

(4) Check appropriate box(es):  
 Candidate Office Sought: School Board District 5  
 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 / 25 / 2016 To 7 / 8 / 2016 Report Type: P2  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 70 . 00  
 Loans \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 70 . 00  
 In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 1 . 06  
 Transfers to Office Account \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 1 . 06

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 2 , 235 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 1 , 867 . 59

### (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 David Michael Morris (2) I.D. Number 451  
 (3) Cover Period 6/25/2016 through 7/8/2016 (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
(6) Sequence Number		Type	Occupation				
6/27/2016 / /	Castleberry, Joe Spain 3251 TAMIAMI TRAIL Port Charlotte, FL 33952	I	real estate	CA			\$40.00
1							
6/27/2016 / /	Swett, Kenneth 2522 Conway Blvd Port Charlotte, FL 33952	I	bookkeeper	CH			\$25.00
2							
7/3/2016 / /	Morrison, Kurt 3800 Bal Harbor Blvd Unit 514 Punta Gorda, FL 33950	I	retired	CA			\$5.00
3							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name David Michael Morris

(2) I.D. Number 451

(3) Cover Period 6/25/2016 through 7/8/2016

(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					
6/27/2016 / /	Kmart, 19400 Cochran Blvd Port Charlotte, FL 33948	thank you card	MO		\$1.06
1					
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