CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) David Michael Morris	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1136995]							
(2) 21173 Midway Blvd	Submitted on:							
Address (number and street) Port Charlotte, FL 33952	12/1/2016 15:16:08 (eastern)							
City, State, Zip Code								
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) Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ 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								
Cover Period: From 7 / 9 / 2016 To	p 7 / 22 / 2016 Report Type: <u>P3</u>							
🗌 Original 🛛 Amendment 🗌 Sp	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, ,000	Expenditures \$, , <u>15</u> . <u>75</u>							
Loans \$,,0.00	Transfers to							
	Office Account \$,,,0.00							
Total Monetary \$, , 0.00								
	Total Monetary \$, , 15.75							
In-Kind \$,, 000								
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, 3_, 856_00	\$,3_,86615							
(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, co								
	(Type name)							
(Type name) ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
X	X							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	David Michael Morri	ael Morris (2) I.D. Number 451				51	
	7/9/2016 od / /		7	/22/2016	(4) Page	e _1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	-						
1 1	-						
1 1	_						
1 1	_						
1 1	_						
1 1	_						
1 1	_						
1 1	_						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Davi	CAMPAIGN TREASURER" d Michael Morris) EXPENDIT 2) I.D. Number	451	
(3) Cover Period	7/9/2016 1/through	7/22/2016	4) Page <u>1</u>	of	1
(5) Date (6) Sequence Number	(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
7/11/2016	Fiverr, 460 Park Avenue South 12th Floor New York, NY 10016	advertising (was supposed to have been refunded)	МО	Add	\$15.75
_/ /					
_/ /					
_ / _/					
_ / _					
11					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES