	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Laurence Clifton Daniels	OFFICE USE ONLY					
(- /	Name	ONLINE SUBMISSION					
(2)	1025 Fletcher Street	[1129530]					
	Address (number and street)	Submitted on: 10/7/2016 16:48:45 (eastern)					
	Port Charlotte, FL 33952						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 458					
(4)	Check appropriate box(es):						
	Candidate Office Sought: County Commis	sioner District 5					
	Political Committee (PC)	☐ Check here if PC or ECO has disbanded					
	☐ Electioneering Communications Org. (ECO)☐ 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 9 / 17 / 2016 To						
		ecial Election Report					
		<u> </u>					
(6)	Contributions This Report	(7) Expenditures This Report					
Casl	n & Checks \$, , <u>330</u> . <u>00</u>	Monetary					
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00					
Tota	I Monetary \$, , <u>330</u> . <u>00</u>	Total Monetary \$, , 480 . 60					
In-Ki	nd \$, , 700.00						
		(8) Other Distributions					
		\$,,					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, <u>4</u> , <u>063</u> . <u>88</u>	\$, <u>3</u> , <u>377</u> . <u>16</u>					
		tification on to falsify a public record (ss. 839.13, F.S.)					
Ιc	ertify that I have examined this report and it is true, corr	• • • • • • • • • • • • • • • • • • • •					
(T·	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
X		X					
Si	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameLau	rence Cli	fton Da	niels		(2) I.D. Number		458	
	9/17/20	16		9/30/	2016				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1

(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	С	(8) ontributor	(9) Contribution	(10)	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
9/20/2016	Lilley, Deborah 21238 Coachman Ave Port Charlotte, FL 33952		retiree	СН			\$250.0
9/20/2016	Herbstoner, John 5601 S Biscayne Dr North Port, FL 34287	I	retiree	CA			\$80.0
9/20/2016	Zinn, Blake 4300 Kings Hwy Port Charlotte, FL 33980	В	business owner	IK	rental of venue liquid for campaign event		\$700.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Laurence	Clift	on	Daniels			 (2) I.D. Nun	nber	4	458	and an analysis of the same an
	9/	17/201	.6		9/30/	2016		-			
(3) Cover P	eriod	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
9/20/2016	Liquid, 4300 Kings Hwy Port Charlotte, FL 33980	food for event 9/20/16	МО		\$159.60
9/20/2016	Watson, Tom 5601 S Biscayne Dr North Port, FL 34287	reimbursements for signs	RM		\$321.00
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