CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) James Herston	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1226778]						
(2) <u>1217 Somerset St</u> Address (number and street)	Submitted on:						
Port Charlotte, FL 33952	8/15/2020 12:02:39 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 597						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>Airport Authority District 5</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) 							
(5) Repor	t Identifiers						
Cover Period: From 7 / <u>11</u> / <u>2020</u> To	7 / <u>17</u> / <u>2020</u> Report Type: <u>P4</u>						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$, , , 0 . 00						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,0.00						
Total Monetary \$	Total Monetary \$, , , 0 . 00						
	(8) Other Distributions						
	\$, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>6</u> . <u>00</u>	\$,, <u>25</u> . <u>00</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:							
(Type name)	(Type name)						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	James Herston		(2) I.D. Number						
7/11/2020			7/17/2020						
(3) Cover Perio	od / /	thro	bugh	<i>ll</i>	(4) Page	e	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
JI									
1 1	_								
1 1	_								
1 1	-								
I I	-								
1 1	_								
1 1	_								
/ /	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITUR (1) Name James Herston (2) I.D. Number						
(3) Cover Period	7/11/2020	7/17/2020	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	
	Herston, James Walker 1217 Somerset Port Charlotte, Fl 33952	no expenditures for this period.	MO		\$0.00	
_/ /						
_/ /						
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