

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Darryl Daniels

Name

(2) Protected

Address (number and street)

,

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 694

(4) Check appropriate box(es):

☒ Candidate Office Sought: Sheriff

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

OFFICE USE ONLY
ONLINE SUBMISSION
[1239159]

Submitted on:

11/15/2020 18:18:54 (eastern)

(5) Report Identifiers

Cover Period: From 8 / 18 / 2020 To 11 / 16 / 2020 Report Type: TR

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 7 , 607 . 54

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 7 , 607 . 54

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 98 , 292 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 98 , 292 . 00

(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 Darryl Daniels **(2) I.D. Number** 694
(3) Cover Period 8/18/2020 through 11/16/2020 **(4) Page** 1 of 0

(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
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Darryl Daniels

(2) I.D. Number 694

(3) Cover Period 8/18/2020 through 11/16/2020

(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
8/18/2020 / /	Slover Consulting LLC, 11764 Marco Beach Drive Ste 9A Jacksonville, FL 32224	consulting fee	MO		\$7,607.54
1					
11/13/2020 / /	DQCSI, PO Box 917 Orange Park, FL 32067	donated to 501.c3	DI		\$1,336.87
2					
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