	CAMPAIGN TREASURE	R'S REPORT SUMMARY				
(1)	Democratic Executive Committee of Lak					
/ 0\	Name	ONLINE SUBMISSION [1143475]				
(2)	4400 N. Hwy 19A; Suite 7	Submitted on:				
	Address (number and street) Mount Dora, FL 32757	7/26/2017 20:19:03 (eastern)				
	City, State, Zip Code					
	☐ Check here if address has changed	(3) ID Number: 294				
(4)	Check appropriate box(es):					
(-)	☐ Candidate Office Sought:					
	☐ 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	dentifiers				
Cove	er Period: From $\underline{4}$ / $\underline{1}$ / $\underline{2017}$ To	6 / 30 / 2017 Report Type: Q2				
□ 0	riginal Amendment Spo	ecial Election Report				
(6)	Contributions This Report	(7) Expenditures This Report				
		Monetary				
Casl	n & Checks \$, , 0 . 00	Expenditures \$, , 0 . 00				
	(
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$				
		Office Account \$, , , 0 . 00				
Tota	I Monetary \$, , 0 . 00	Total Monetary \$. 0 . 00				
	. \$ 20 00	Total Monetary \$, , 0 . 00				
In-Ki	nd \$,, <u>20</u> . <u>00</u>	(8)				
		(8) Other Distributions \$, , 0.00				
		\$,, <u>0</u> 00				
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
	\$	\$, <u>86</u> , <u>439</u> . <u>41</u>				
		tification on to falsify a public record (ss. 839.13, F.S.)				
Lo		• • • • • • •				
I certify that I have examined this report and it is true, correct, and complete:						
<u> </u>	ype name)	(Type name)				
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)				
х		X				
	gnature	Signature				

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Democratio	c Execut	ive Committ	ee of La	ke Coun), I.D. Number		294	19
	4/1/20)17		6/30	/2017				
(3) Cover Perio	d /	1	through	1	1	(A) Page	1	of	1

		1			T	Ţ	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C _i Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
5/10/2017	Hurlbert, Nancy L 35624 Cypress Ct. Leesburg, FL 34788		retired	IK	voter list request fee paid to lake co. soe	Add	\$10.0
6/19/2017	Hurlbert, Nancy L 35624 Cypress Ct. Leesburg, FL 34788	I	retired	IK	payment to lake county soe for voter list.	Add	\$10.0
1 1							
Ī Ī							
Ĭ Ĭ							
1 1							
J 1							
J J							

C/ (1) Name Democ	AMPAIGN TREASURER'S R ratic Executive Committee	of Lake County	EMIZED EXPENDITURES Entry (2) I.D. Number 294			
(3) Cover Period _	4/1/2017 6/3 I I through	30/2017 _//(4	4) Page <u>1</u>	of	0	
(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)	(11) Amount	
//						
//						
//						
//						
//						
//						
//						