	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Democratic Executive Committee of Lak							
	Name	ONLINE SUBMISSION [1144959]						
(2)	4400 N. Hwy 19A; Suite 7	Submitted on:						
	Address (number and street)	10/6/2017 07:50:54 (eastern)						
	Mount Dora, FL 32757							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 294						
(4)	Check appropriate box(es):							
	Candidate Office Sought:							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ 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 $\frac{4}{2}$ / $\frac{1}{2017}$ To							
	riginal Amendment Spo	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$ , , 0 . <u>02</u>	Expenditures \$ , , 0 . 00						
	Φ 0.00							
Loar	s ,, ,, ,	Transfers to Office Account \$						
	<b>c</b> 0 02	Office Account \$ , , , 0 . 00						
Tota	I Monetary \$ , , 0 . 02	Total Monetary \$ . 0 . 00						
	<b>.</b> . <b>.</b>	Total Monetary \$ , , , 0 . 00						
In-Ki	ind \$,, <u>0</u> . <u>00</u>							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	(9) TOTAL Monetary Contributions To Date (10) TOTAL Monetary Expenditures To Date							
	\$	\$, <u>86</u> , 439. 41						
(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:								
_(T	(Type 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	Democratic	Execut	ive Committe	e of La	ke Cou	$\mathbf{Q}_{\mathbf{y}}$ I.D. Number		294	
	4/1/201	_7		6/30/	2017				
(3) Cover Period	I	F	through	1	1	(4) Page	1	_ of _	1

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6/30/2017	First Natl Bank of Mount Dora, PO Box 95 Mount Dora, FL 32756	В		IN		Add	\$0.0
6/30/2017	First Natl Bank of Mount Dora, PO Box 95 Mount Dora, FL 32756	В		IN		Add	\$0.0
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f 1							
1 1							

C/ (1) Name Democ	AMPAIGN TREASURER'S R ratic Executive Committee	of Lake County	TURES er 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
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