FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) JACQUELINE Y DANIS  Name	OFFICE USE ONLY 639							
(2) 1814 LOCKHAVEN CT, LEHIGH ACRES, FL 3397 Address (number and street)								
City, State, Zip Code								
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:							
(4) Check appropriate box(es):  ☐ Candidate (office sought): LEHIGH ACRES FIRE-5 ☐ Political Committee ☐ CHECK IF PC HAS DISBANDED ☐ Committee of Continuous Existence ☐ CHECK IF CCE HAS DISBANDED ☐ Party Executive Committee ☐ Electioneering Communication ☐ CHECK IF NO OTHER ELECTIONEERING								
(5) REPORT	COMMUNICATION REPORTS WILL BE FILED							
Cover Period: From   8/10/2012	9/14/2012 / Report Type G1							
☐ Original	Report							
(6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT								
Cash & Checks \$0.00	Monetary Expenditures \$ 0.00							
Loans \$	Transfers to Office Account \$ 0.00							
Total Monetary \$	Total Monetary \$ 0.00							
In-Kind \$								
	(8) Other Distributions \$0.00							
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$458.92_							
(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)  I certify that I have examined this report and it is true correct, and complete.  (Type name)								
Individual (only for election eering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)							
Signature	Signature							

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name	JACQUELINE Y DANIS				z) I.D. Numbe	6	39
	8/10/2012		9	/14/2012			
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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ntributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name JACQ	UELINE	Y DANI:	S			 (2) I.D. Nun	nber	(	639	
	8/10/	/2012		9/14/20	)12	~ ~				
(3) Cover Period	<b>d</b> /	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
8/11/2012	Handy/Gasoline , 3121 Lee Blvd Lehigh Acres , FL 33971	gasoline/ transport ation	PW	Delete	\$30.00
8/11/2012	Danis, Jacqueline 1814 Lockhaven Ct Lehigh Acres , FL 33972	gasoline/ transport ation	PW	Add	\$30.00
8/11/2012	Danis, Jacqueline 1814 Lockhaven Ct Lehigh Acres, FL 33972	handy/gas oline	PS	Add	\$30.00
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