

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) John E Dailey
 Name
 (2) 1427 Piedmont Dr E
 Address (number and street)
Tallahassee, FL 32308
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1150377]

Submitted on:
 3/7/2018 15:33:39 (eastern)

Check here if address has changed (3) ID Number: 518

(4) Check appropriate box(es):

Candidate Office Sought: Leon County Commission - District 3

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

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

(5) Report Identifiers

Cover Period: From 2 / 1 / 2018 To 2 / 28 / 2018 Report Type: M2

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 \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 15 , 950 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 32 . 80

(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 John E Dailey (2) I.D. Number 518
 (3) Cover Period 2/1/2018 through 2/28/2018 (4) Page 1 of 2

(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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
2/9/2018 / /	Vedder, Nicole 3370 Lake Run Dr Tallahassee, FL 32309	I	insurance	CH		Delete	\$250.00
1							
2/9/2018 / /	Vedder, Nicole 3370 Lake Run Dr Tallahassee, FL 32309	I	health insurance sales	CH		Add	\$250.00
2							
2/27/2018 / /	Bacon, Robert P.O. Box 12039 Tallahassee, FL 32317	I	insurance	CH		Delete	\$250.00
3							
2/27/2018 / /	Bacon, Robert P.O. Box 12039 Tallahassee, FL 32317	I	health insurance sales	CH		Add	\$250.00
4							
2/27/2018 / /	Silver, Joel P.O. Box 20782 Tallahassee, FL 32316	I	media production s	CH		Delete	\$200.00
5							
2/27/2018 / /	Silver, Joel P.O. Box 20782 Tallahassee, FL 32316	I	digital media advising	CH		Add	\$200.00
6							
2/27/2018 / /	Webster-Sachs, Gay 118 N. Monroe St Tallahassee, FL 32301	I	finance	CH		Delete	\$250.00
7							
2/27/2018 / /	Webster-Sachs, Gay 118 N. Monroe St Tallahassee, FL 32301	I	media finance director	CH		Add	\$250.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John E Dailey (2) I.D. Number 518
 (3) Cover Period 2/1/2018 through 2/28/2018 (4) Page 2 of 2

(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
(6) Sequence Number							
2/28/2018 / /	Dailey, Charles 7044 Standing Pines Ln Tallahassee, FL 32312	I	development	CH		Delete	\$250.00
9							
2/28/2018 / /	Dailey, Charles 7044 Standing Pines Ln Tallahassee, FL 32312	I	real estate	CH		Add	\$250.00
10							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John E Dailey

(2) I.D. Number 518

(3) Cover Period 2/1/2018 through 2/28/2018

(4) Page 1 of 0

(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
(6) Sequence Number					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					