	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Uline Daniel	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION								
(2)	1122 Alameda Avenue	Submitted on:								
	Address (number and street)	6/10/2021 16:41:50 (eastern)								
	Fort Pierce, FL 34982									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:506								
(4)	Check appropriate box(es):									
		Pierce Commission, District 2								
	Political Committee (PC)	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		5 / 31 / 2021 Report Type: M5								
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , _4200	Monetary								
Loar	s , , , ,	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$, , _4200	Total Monetary \$, , 2 . 90								
In-Ki	ind \$, , 0.00									
		(8) Other Distributions								
		\$,, <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$,, <u>512</u> . <u>00</u>	\$, , <u>35</u> . <u>56</u>								
	(11) Cert It is a first degree misdemeanor for any pers	tification on to falsify a public record (ss. 839.13, F.S.)								
Ιc	certify that I have examined this report and it is true, corr	. , ,								
(Type name) (Type name)										
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Uline Daniel			((2) I.D. Number				
	5/1/2021		5	/31/2021		no. 1			
(3) Cover Per	iod//	thro	ough	11	(4) Pag	e <u>-</u>	of <u>-</u>		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)		
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
5/31/2021	Arty, Marie 126 SW Amesbury Ave Port St Lucie, FL 34953	I	Goodpadon	CA	Восоприон		\$25.0		
1									
5/31/2021	Clairisme, Sophania	ı I		CA			\$17.0		
2	fort pierce, FL 34950								
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name <u>U1</u>	Uline Daniel						 (2) I.D. Nur	nber	506			
		5/1/2	02	1		5/31/2	2021					
(3) Cover Per	riod	I		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
5/27/2021	Supervisor of Elections Office, 4132 Okeechobee Road	petition verification fee	MO		\$2.90
1	Fort Pierce, FL 34947			5	
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