

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Uline Daniel  
 Name  
 (2) 1122 Alameda Avenue  
 Address (number and street)  
Fort Pierce, FL 34982  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1263331]

Submitted on:  
 6/9/2022 04:21:19 (eastern)

Check here if address has changed

(3) ID Number: 506

(4) Check appropriate box(es):

- Candidate Office Sought: City of Fort Pierce Commission, District 2
- 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 Identifiers

Cover Period: From 5 / 1 / 2022 To 5 / 31 / 2022 Report Type: M5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 225 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 225 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 22 . 62

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 22 . 62

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,      , 2 , 675 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      , 1 , 122 . 07

### (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 Uline Daniel (2) I.D. Number 506  
 (3) Cover Period 5/1/2022 through 5/31/2022 (4) Page 1 of 1

(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
5/23/2022 / /	Golene, Gordon 230 Lake Monterey cir Boynton Beach, FL 32426	I	manager	CH			\$100.00
1							
5/23/2022 / /	Yvonne, Richardson 88 Huntington terrace Newark, NJ 07112	I		CH			\$25.00
2							
5/27/2022 / /	Yvesmarie, Joseph Protected Port St Lucie, FL 34986	I	pharmacy manager	CH			\$100.00
3							
/ /							
/ /							
/ /							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Uline Daniel

(2) I.D. Number 506

(3) Cover Period 5/1/2022 through 5/31/2022

(4) Page 1 of 1

(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					
5/2/2022 / /	Bank of America, 2421 S US Hwy 1 Fort Pierce, FL 34982	bank monthly fee	MO		\$16.00
1					
5/25/2022 / /	Raise The Money, P.O. Box 26466 Little Rock, AR 72221	merchant fee	MO		\$6.62
2					
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