CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Henry M. Duhart	OFFICE USE ONLY								
_	Name	ONLINE SUBMISSION [1256521]								
(2)	638 S 12th St	Submitted on:								
	Address (number and street) Fort Pierce, FL 34950	3/8/2022 00:12:03 (eastern)								
-	City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number: 530								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: City of Fort Pierce Commission, District 1</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From 9 / 1 / 2021 To	9 / 17 / 2021 Report Type: FPP1								
☐ Or	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	a & Checks \$,,,000	Monetary								
Loan	<del></del>	Transfers to Office Account \$ , , , 0 . 00								
	Monetary \$,,,0 . 00	Total Monetary \$ ,1 , <u>000</u> . <u>00</u>								
In-Kir	nα Ψ,, <u>σ</u> . <u>σσ</u> .	(8) Other Distributions \$ , , 000_								
	(9) TOTAL Monetary Contributions To Date \$,1_,21000									
(Ty	(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									
-	nature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Henry M. Duhart				2) I.D. Numbe	er5	30
	9/1/2021		9	/17/2021			
(3) Cover Perio	od//	thro	ough	11	(4) Pag	e 1	of 0
1000 98			1400				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	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 <u> </u>	Henry	Μ.	Duha	rt					 (2) I.D. Num	nber	5	530	300
		9/	1/202	21		9/17	/20	21					
(3) Cover Pe	eriod		1	1	through	1	8	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
9/17/2021	Christ, Inc., In The Image Of 707 North 7th St. Ft. Pierce, FL 34950	refund to organization	RE	Add	\$1,000.00
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