CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Daniel Warren	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1274587]						
(2) <u>3087 Bureau Path</u> Address (number and street)	Submitted on:						
Address (number and street) The Villages, FL 32163	8/7/2022 21:42:02 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number:						
(4) Check appropriate box(es):							
<ul> <li>Candidate Office Sought: North Sumter Co Utility Dependent District, Seat 5</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> </ul>							
(5) Report Identifiers							
Cover Period: From 7 / <u>30</u> / <u>202</u> 2 To	8 / 5 / <u>2022</u> Report Type: <u>P6</u>						
🖾 Original 🔄 Amendment 🔄 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , <u>10</u> . <u>00</u>						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,000						
Total Monetary       \$	Total Monetary \$ , , _10 . 00						
······································	(8) Other Distributions						
	\$,, 00						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>100</u> . <u>00</u>	\$,, <u>33</u> . <u>30</u>						
(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)	(Type name)						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
x	x						
Signature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Daniel Warren	(2) I.D. Number					82	
	7/30/2022			8/5/2022				
(3) Cover Peri	od / /	thro	bugh	<i>II</i>	(4) Page	e	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITUR (1) Name Daniel Warren (2) I.D. Number (2)						
(3) Cover Period	7/30/2022 I/through	8/5/2022 //	4) Page <u>1</u>	of_	1	
(5) Date (6) Sequence Number	(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	
7/30/2022	Citizens First Bank, PO Box1927 The Villages, FL 32158-1927	checking account maintenance charge	МО		\$10.00	
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11						
11						

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