CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Democratic Executive Committee							
Name (2)	ONLINE SUBMISSION [1092472]						
Address (number and street)	Submitted on:						
, City State Zin Code	10/13/2015 12:00:36 (eastern)						
City, State, Zip Code	(3) ID Number: 13						
(4) Check appropriate box(es):							
Candidate Office Sought:							
Political Committee (PC) Starting Communications One (ECO)							
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	Check here if PC or ECO has disbanded 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						
	t Identifiers						
	9 / <u>30</u> / <u>2015</u> Report Type: <u>Q3</u>						
Original Amendment Special Election Report							
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 0 . 00	Monetary Expenditures \$						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,0.00						
Total Monetary \$	Total Monetary \$,, <u>152</u> .00						
In-Kind \$,, <u>0</u> .00							
	(8) Other Distributions \$,,,						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>10</u> , <u>810</u> . <u>82</u>	\$, <u>10</u> , <u>069</u> . <u>06</u>						
(11) Cer	I						
	son to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, cor	rect, and complete:						
(Type name)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	<u>X</u>						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Democratic Executive Committee (2) I.D. Number 13						.3
	7/1/2015 od//		9	/30/2015			
(3) Cover Ferr	ou / /			<i>ii</i>	(4) Fay		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)			Contribution	Les triveal		
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
Number		Турс	Occupation	Турс	Description		Amount
1 1	-						
1 1							
1 1							
1 1	-						
1 1	_						
1 1	_						
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Dem	CAMPAIGN TREASURER' ocratic Executive Commit	tee	EXPENDITURES 2) I.D. Number13		
(3) Cover Period	7/1/2015 I/through_	9/30/2015 /	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
7/28/2015	Pienta, Dave 53 Meadowlark Drive Crawfordville, Fl 32327	refund paypal misapplied payment	MO	Add	\$152.00
_/ /					
_/ /					
_/ /					
_/ /					
11					
11					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES