

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

RECEIVED

(1) JOHN DAVENPORT
Name

(2) AS PER STATUTE 119.07
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

OFFICE USE ONLY
04 OCT 29 PM 1:26

SUPERVISOR OF ELECTIONS

(4) Check appropriate box(es):

- Candidate (office sought): CHARLOTTE COUNTY SHERIFF
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 09 / 04 To 10 / 28 / 04 Report Type G4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 718.75

Loans \$ _____

Total Monetary \$ 718.75

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 17.00

Transfers to Office Account \$ _____

Total Monetary \$ 17.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 53,225.37

(10) TOTAL Monetary Expenditures To Date

\$ 51,135.99

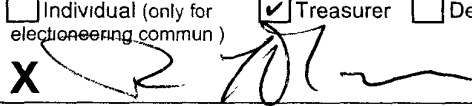
(11) CERTIFICATION

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) RON OLSEN

Individual (only for electioneering commun) Treasurer Deputy Treasurer

X 
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) JOHN DAVENPORT

Candidate Chairperson (only for PC, PTY & electioneering commun organization)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JOHN DAVENPORT

(2) I.D. Number _____

(3) Cover Period 10 / 09 / 04 through 10 / 28 / 04

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9)	(10)	(11)	(12)
		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
10 / 14 / 04	COMCAST 360 INTERSTATE NORTH PARKWAY #600 ATLANTA, GA 30339	B	TV	REF			718.75
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