

1. (a) Name of Candidate (in full)

DONNA CLARKE

(b) Address (number and street)

(b) Address (number and street) ☐ Check if address changed
1800 Second Street Suite 810

☐ Check if address changed

2. Identification Number

(c) City, State, and ZIP Code

(c) City, State, and ZIP Code
SARASOTA . FLORIDA 34236

3. Is This Statement ☒ New (N) OR ☐ Amended (A)

4. Party Affiliation:

Party Affiliation: **REPUBLICAN**

5. Office Sought

5. Office Sought
U.S. HOUSE

6. State & District of Candidate

State & District of Candidate
FLORIDA - 13

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2006 election(s)
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Friends of Donna CLARKIE

(b) Address (number and street)

1800 SECOND STREET SUITE 810

(c) City, State, and ZIP Code

SARASOTA FLORIDA 34236

(Including Joint Fundraising Representatives)

B. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

NOVE

(b) Address (number and street)

(c) City, State, and ZIP Code

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A

0.00

for the primary election, and

9E

0.00

for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate

of Candidate
Bernie Clarke

Date _____

10.6.05

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

2017-2018 FARM CASH FLOW STATEMENT							
	2017	2018	2017	2018	2017	2018	2017
1. Net Income							
2. Depreciation							
3. Amortization							
4. Gain (Loss) on Sale of Assets							
5. Change in Accounts Receivable							
6. Change in Accounts Payable							
7. Change in Inventory							
8. Change in Prepaid Expenses							
9. Change in Other Assets							
10. Change in Other Liabilities							
11. Change in Other Equity							
12. Net Change in Cash							
13. Cash at Beginning of Year							
14. Cash at End of Year							

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <div style="margin-left: 40px;"><i>Fedex</i></div>	Shipping Date <i>10/7/05</i> Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER (3/2005)	DATE PREPARED

60
57
54
51
48
45
42
39
36
33
30
27
24
21
18
15
12
9
6
3