

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Troy Kent
Name

(2) 130 Magnolia Drive
Address (number and street)
Ormond Beach, FL 32176
City, State, Zip Code

OFFICE USE ONLY

30-07-14P03:18 RCVD

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Candidate | Office Sought: <u>CITY Commissioner Zone 2</u> | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY) | | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | | |

(5) Report Identifiers

Cover Period: From 07/19/14 To 07/25/14 Report Type: P4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	____, ____ , ____
Loans	\$	____, ____ , ____
Total Monetary	\$	____, ____ , ____
In-Kind	\$	____, ____ , ____

(7) Expenditures This Report

Monetary Expenditures	\$	____, ____ , ____
Transfers to Office Account	\$	____, ____ , ____
Total Monetary	\$	____, ____ , ____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 6,950.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 1,942.91

(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) Troy Kent
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Troy Kent
Signature

(Type name) Troy Kent
 Candidate Chairperson (only for PC and PTY)

X Troy Kent
Signature