

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Troy Kent
Name

(2) 130 Magnolia Dr.
Address (number and street)

Ormond Beach, FL 32176
City, State, Zip Code

OFFICE USE ONLY

Tue 4/3/2018 8:56 AM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Ormond Beach City Commissioner Zone 2
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 03 / 01 / 18 To 03 / 31 / 18 Report Type: M3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , 200 . 00

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 200 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 0 . 00

(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) Richard A. Lovell

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

X Richard A. Lovell
Signature

(Type name) Troy Kent

Candidate Chairperson (only for PC and PTY)

X Troy Kent
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Troy Kent (2) I.D. Number _____

(3) Cover Period 03 / 01 / 18 through 03 / 31 / 18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
03, 02, 18 1	Troy Kent 130 Magnolia Dr. Ormond Beach, FL. 32176	S	Educator/ Teacher	CAS			200 ⁰⁰
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							