

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry William du Moulin
 Name
 (2) 30 Marjorie Trail
 Address (number and street)
Ormond Beach, FL 32174
 City, State, Zip Code

OFFICE USE ONLY

Fri 8/10/18 1:53 PM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City Commissioner Zone # 4
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) 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

(5) Report Identifiers

Cover Period: From 08 / 04 / 18 To 08 / 10 / 18 Report Type: 2018P6

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , 19 . 38

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 545 . 06

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 723 . 76

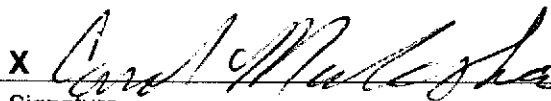
(11) Certification

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:

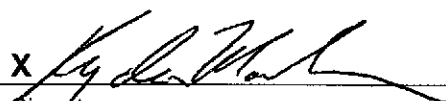
(Type name) Carol Maleska

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


 Signature

(Type name) Barry W. du Moulin

Candidate Chairperson (only for PC and PTY)


 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry W. du Moulin (2) I.D. Number _____

(3) Cover Period 08 / 04 / 18 through 08 / 10 / 18 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
08 / 07 / 18	11	Breslin Reprographics 919 N. Nova Road Holly Hill, FL 21117 Stacy Atkins		Para-legal	INK	Zone Map Enlarg		19.38
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