

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David W. Glasser
Name

(2) 4 Arbor Lake Park
Address (number and street)

Ormond Beach, FL 32174
City, State, Zip Code

OFFICE USE ONLY

Fri 8/24/18 9:06 AM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Ormond Beach City Commissioner June 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 8 / 11 / 18 To 8 / 23 / 18 Report Type: 7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , _____ , _____ . _____

Loans \$ 0 , _____ , _____ . _____

Total Monetary \$ 0 , _____ , _____ . _____

In-Kind \$ 0 , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 20 . 00

Transfers to Office Account \$ _____ , _____ , 0 . _____

Total Monetary \$ _____ , _____ , 70 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 500 . 500

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 404 . 69

(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:

| | |
|---|--|
| <p>(Type name) <u>David W. Glasser</u></p> <p><input type="checkbox"/> Individual (only for IE or electioneering comm.) <input checked="" type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p><u>DW Glasser</u></p> <p>Signature</p> | <p>(Type name) _____</p> <p><input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC and PTY)</p> <p><u>DW Glasser</u></p> <p>Signature</p> |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel W. Glasser (2) I.D. Number _____

(3) Cover Period 8 / 11 / 18 through 8 / 13 / 18 (4) Page 1 of 1

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor | | (9) Contribution | (10) In-kind | (11) Amendment | (12) Amount |
|---------------------------|--|--------------------|------------|---------------------|-----------------|-------------------|----------------|
| (6) Sequence Number | | Type | Occupation | Type | Description | | Amount |
| 0 / / | | | | | | | |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name David W. Glasser

(2) I.D. Number _____

(3) Cover Period 8 / 11 / 18 through 8 / 23 / 18

(4) Page 1 of 1

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add office sought if contribution to a candidate) | (9) Expenditure Type | (10) Amendment | (11) Amount |
|---------------------------|---|--|----------------------------|-------------------|----------------|
| (6) Sequence Number | | | | | |
| 8 / 16 / 18 1 | Daytona Beach Area Association of Realtors 1716 Ridge Wood Avenue Daytona Beach, FL 32117 | Payment for political luncheon | CAN | | \$20.00 |
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