	CAMPAIGN TREASURE	ER'S REPORT SUMMARY					
(1)	Greg Hansen	OFFICE USE ONLY					
•	Name	ONLINE SUBMISSION					
(2)	27 Coleridge Ct	Submitted on:					
	Address (number and street)	11/7/2017 14:53:01 (eastern)					
	Palm Coast, Fl 32137						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:399					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: County Commis	sion District 2					
	Political Committee (PC)	☐ Check here if PC or ECO has disbanded					
	☐ Electioneering Communications Org. (ECO) [☐ Party Executive Committee (PTY) [	☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	t Identifiers					
Cov							
Цο	Driginal ☑ Amendment ☐ Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Casl	h & Checks \$ , , ,000	Expenditures \$ , , _10 . 60					
	Φ 0.00						
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$					
<b>-</b> .	<b>c</b> 0 00	Office Account \$ , , , 0 . 00					
lota	al Monetary \$ , , 0 . 00	Total Monetary \$ , 10 . 60					
1 12	· · • • 0 00	Total Monetary \$ , , _10 . 60					
In-Ki	find \$,,,000						
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$	\$ , <u>4</u> , <u>396</u> . <u>93</u>					
		tification					
	It is a first degree misdemeanor for any personal						
I certify that I have examined this report and it is true, correct, and complete:							
(T	ype name)	(Type name)					
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
0.	decubricaling comm.)						
X		x					
Si	ignature	Signature					

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name _	Greg Hansen			(2) I.D. Number 399				
	10/1/2017			0/31/2017		_		
(3) Cover Pe	eriod / /	thro	ough	<i>I I</i>	(4) Page	e <u>1</u>	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind	Amendment	A	
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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<u> </u>								
. F 9								
1 1								
<i>I I</i>								
		4						
1 1								

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Greg	Greg Hansen					(2) I.D. Numbe	er	399		
	10/1/2	017		10/31/2	2017					
(3) Cover Period	1	1	through	/	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/21/2017	Supervisor of Elections, Flagl, 1769 E Moody Blvd BLDG 2, Suite 101 Bunnel, FL 32110	submission of petitions	МО	Add	\$10.60
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DS-DE 14 (Rev.	44(40.1)				