CAMPAIGN TREASURER'S REPORT SUMMARY											
(1)	Joe Mullins	OFFICE USE ONLY									
` ,	Name	ONLINE SUBMISSION									
(2)	PO Box 2677	[1175893]									
	Address (number and street)	Submitted on:									
	Bunnell, Fl 32110	10/12/2018 14:25:29 (eastern)									
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number: 415									
(4)	Check appropriate box(es):										
	<ul> <li>☐ County Commission District 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>										
	(5) Report	Identifiers									
Cove	er Period: From 9 / 29 / 2018 To	10 / 5 / 2018 Report Type: <u>G4</u>									
X O	riginal Amendment Spe	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Cash	n & Checks \$ , , 0 . 00	Monetary Expenditures \$ ,2 , 541 . 00									
Loar	<del></del>	Transfers to Office Account \$ , , , 0 . 00									
Tota	I Monetary \$,,,00	Total Monetary \$ , 2 , <u>541</u> . <u>00</u>									
In-Ki	nd \$,, <u>0</u> . <u>00</u>										
		(8) Other Distributions \$ , , 000_									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$, <u>118</u> , <u>250</u> . <u>00</u>	\$, <u>112</u> , <u>867</u> . <u>99</u>									
_(T)	(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)  Individual (only for IE  Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY)										
	electioneering comm.)										
X		_X									
Sie	gnature	Signature									

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Joe Mullins			(2) I.D. Number							
	9/29/2018		1	0/5/2018							
(3) Cover Perio	od / /	thro	ough	<i>l l</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 &	Co	ontributor	Contribution	In-kind						
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount				
1 1											
1 1											
1 1											
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1 1		,									
1 1											

DS-DE 13 (Rev. 11/13 ) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name	e	Mullin	S						110-1101	_ (	2) I.D. Nui	mber		415	
		9/2	9/2	018			10/5/	2018	3			-			
(3) Cover Per	ioc		P21	1	thro	ıqh	1		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
10/1/2018	Morea, Josephine 27 Longview Way N Palm Coast, FL 32137	canvassing	MO		\$1,131.00
10/2/2018	Benton, Dottye 29 Ryder Dr Palm Coast, FL 32164	canvassing	МО		\$1,060.00
10/2/2018	Heffern, Bill 8 Bishop Ln Palm Coast, FL 32137	canvassing	MO		\$350.00
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