

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barbara Revels
 Name
 (2) PO Box 434; 316 S. Oceanshore Blvd
 Address (number and street)
Flagler Beach, Fl 32136
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1129860]
 Submitted on:
 10/10/2016 12:38:19 (eastern)

Check here if address has changed

(3) ID Number: 336

(4) Check appropriate box(es):

- Candidate Office Sought: County Commission District 3
- 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 10 / 1 / 2016 To 10 / 7 / 2016 Report Type: G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 000 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1 , 000 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 10 , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 3 , 481 . 57

(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 or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barbara Revels (2) I.D. Number 336
 10/1/2016 through 10/7/2016
 (3) Cover Period / / through / / (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						
10/5/2016 / /	F.C. Pro. Firefighters Assn., P. O. Box 1904 Bunnell, FL 32110	O profession al associatio n	CH			\$250.00
1						
10/5/2016 / /	Florida Fire - PAC, 343 W Madison St Tallahassee, FL 32301	F pac	CH			\$250.00
2						
10/5/2016 / /	S. E. Cline Construction, Inc., P. O. Box 354425 Palm Coast, FL 32135	B contractor	CH			\$250.00
3						
10/5/2016 / /	Wilson, G Matthew 1 Waywell Place Palm Coast, FL 32164	I realtor	CH			\$250.00
4						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barbara Revels

(2) I.D. Number 336

(3) Cover Period 10/1/2016 through 10/7/2016

(4) Page 1 of 0

(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					
/ /					
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