

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Dennis McDonald  
 Name  
 (2) PO Box 1232  
 Address (number and street)  
Flagler Beach, Fl 32136  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1174724]  
 Submitted on:  
 10/5/2018 16:01:51 (eastern)

Check here if address has changed

(3) ID Number: 429

(4) Check appropriate box(es):

- Candidate Office Sought: County Commission District 2
- 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 9 / 15 / 2018 To 9 / 28 / 2018 Report Type: G3

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        , 7 , 037 . 95

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        , 7 , 037 . 95

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 2 , 500 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 9 , 275 . 99

### (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 Dennis McDonald (2) I.D. Number 429  
 (3) Cover Period 9/15/2018 through 9/28/2018 (4) Page 1 of 0

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type Occupation |  | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-------------|------------------------------------------------------------------------------------------------|---------------------------------------|--|-----------------------------|--------------------------------|-------------------|----------------|
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |
| / /         |                                                                                                |                                       |  |                             |                                |                   |                |

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

(1) Name Dennis McDonald

(2) I.D. Number 429

(3) Cover Period 9/15/2018 through 9/28/2018

(4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |                                                                                                |                                                                            |                            |                   |                |
| 9/22/2018<br>/ /          | Post Master,<br>2 Pine Cone Dr<br>Palm Coast, fl 32137                                         | postage                                                                    | MO                         |                   | \$1,934.00     |
| 1                         |                                                                                                |                                                                            |                            |                   |                |
| 9/22/2018<br>/ /          | Dolphin Printing,<br>37 Ryberry Dr<br>Palm Coast, fl 32136                                     | printed<br>materials                                                       | MO                         |                   | \$908.00       |
| 2                         |                                                                                                |                                                                            |                            |                   |                |
| 9/15/2018<br>/ /          | Dolphin Printing, Dolphin<br>37 Ryberry Dr<br>Palm Coast, fl 32136                             | print<br>materials                                                         | MO                         |                   | \$304.95       |
| 3                         |                                                                                                |                                                                            |                            |                   |                |
| 9/20/2018<br>/ /          | DolphinPrinting,<br>37 Ryberry Dr<br>Palm Coast, fl 32136                                      | print materials                                                            | MO                         |                   | \$1,836.00     |
| 4                         |                                                                                                |                                                                            |                            |                   |                |
| 9/20/2018<br>/ /          | PostMaster,<br>2 Pine Cone Dr<br>Palm Coast, fl 32137                                          | postage                                                                    | MO                         |                   | \$2,055.00     |
| 5                         |                                                                                                |                                                                            |                            |                   |                |
| / /                       |                                                                                                |                                                                            |                            |                   |                |
| / /                       |                                                                                                |                                                                            |                            |                   |                |
| / /                       |                                                                                                |                                                                            |                            |                   |                |
| / /                       |                                                                                                |                                                                            |                            |                   |                |