CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Nicholas Klufas	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	71 Southlake Dr.	Submitted on:						
	Address (number and street)	7/24/2020 14:02:05 (eastern)						
	Palm Coast, Fl 32137  City, State, Zip Code							
	_	(2) ID Novelean 405						
	Check here if address has changed	(3) ID Number: 495						
(4)	Check appropriate box(es):							
	Candidate Office Sought: Palm Coast Ci	ty Council Member Seat 3						
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	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						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cove	er Period: From 7 / 11 / 2020 To	7 / 17 / 2020 Report Type: P4						
X o	riginal Amendment Spo	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	n & Checks \$ , , <u>100</u> . <u>00</u>	Monetary						
Loar	s , , , ,	Transfers to Office Account \$ , , 0 . 00						
Tota	I Monetary \$ , , 100 . 00							
		Total Monetary \$ , , 0 . 00						
In-Ki	ind \$,,,000							
		(8) Other Distributions \$ , , 000_						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>12</u> , <u>700</u> . <u>00</u>	\$, <u>2</u> , <u>233</u> . <u>00</u>						
(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:								
(T	(Type name) (Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		_X						
Si	gnature	Signature						

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

(1) Name	Nicholas Klufas				2) I.D. Numbe	r4	95
	7/11/2020			/17/2020			
(3) Cover Perio	od//	thro	ough	11_	(4) Pag	e <sup>1</sup>	of <sup>1</sup>
W.50 BA			1000				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
7/17/2020	Edwards, William	I	retired	СН			\$100.0
	30 Westover lane Palm Coast, FL 32137						
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name_	Nichol	as Kluf	Eas		, 100 march 10 march		(2	2) I.D. Nun	nber	4	195	
(3) Cover l	Period _	7/11/2	020	through	7/17/20 /	/ <u>/</u>	(4	l) Page	1	of	0	

(5) Date	(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
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