

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael &#34;Mike&#34; Martin  
 Name

(2) 5 Lake Success Dr  
 Address (number and street)

Palm Coast, FL 32137  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1228658]

Submitted on:  
 8/31/2020 11:48:35 (eastern)

Check here if address has changed

(3) ID Number: 511

(4) Check appropriate box(es):

- Candidate Office Sought: East Flagler Mosquito Control District Seat 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 7 / 25 / 2020 To 7 / 31 / 2020 Report Type: P6

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 500 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 500 . 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

\$        ,        , 500 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 322 . 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 Michael &#34;Mike&#34; Martin (2) I.D. Number 511

7/25/2020 through 7/31/2020

(3) Cover Period      /      /      through      /      /      (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>Contributor |            | (9)<br>Contribution | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|---------------------------|--|--------------------|------------|---------------------|--------------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  | Type               | Occupation | Type                |                                |                   |                |
| 7/28/2020<br>/ /          | Martin, Michael<br>5 Lake Success Drive<br>Palm Coast, FL 32137                                | S                  | retired    | CH                  |                                | Add               | \$500.00       |
| 1                         |  |                    |            |                     |                                |                   |                |
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Michael &#34;Mike&#34; Martin

(2) I.D. Number 511

(3) Cover Period 7/25/2020 through 7/31/2020

(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>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 |  |  |                            |                   |                |
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