CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Jane Gentile-Youd	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	3 Magnolia Dr. N. (Flagler County)	Submitted on:							
	Address (number and street)	9/15/2022 11:26:14 (eastern)							
	Ormond Beach, Fl 32174								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 563							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: County Commission District 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	(5) Report	Identifiers							
Cov	er Period: From 8 / 27 / 2022 To								
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , ,000	Monetary							
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$,,	Total Monetary \$ ,1 , <u>062</u> . <u>65</u>							
In-Ki	ind \$,, <u>0</u> . <u>00</u>								
		(8) Other Distributions \$ , , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(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								
X		X							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jane Gentile-Youd				2) I.D. Numbe	er5	663
	8/27/2022			/9/2022			
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of
4							
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)		e verbalde automo	0-1-10-11-1	Los Consult		
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
Number	Oity, State, Zip Code	Type	Occupation	туре	Description	y arrest distriction	Amount
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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	ane	Gentile-Yo	oud				(2) I.I	D. Numb	er	5	63	
		8/27/202	2		9/9/202	22	~ ~					
(3) Cover Pe	riod	1	1	through	1	1	(4) P	age	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
8/27/2022	Hispanic American Club, 52 Pitt Lane Palm Coast , FL 32164	event	МО		\$40.00
9/2/2022	Flagler Broadcasting, 2405 East Moody Blvd Bunnell, FL 32110	radio advertising	МО		\$504.00
9/5/2022	Flaglerive, P.O. Box 354263 Palm Coast, FL 32135	advertising	МО		\$200.00
9/6/2022	Kiwania Club of Flagler County, c/o Les Lohnes 23 Evans Drive Palm Coast, FL 31164	event	МО		\$110.00
9/8/2022	Oceanshore Graphics, 510 N. Daytona Avenue Flagler Beach, FL 32136	campaign signs	МО		\$208.65
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