	CAMPAIGN TREASURE	ER'S REPORT SUMMARY							
(1)	Shauna C. Kanter	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	23 Leidel Dr	Submitted on:							
	Address (number and street)	7/11/2022 10:55:42 (eastern)							
	Palm Coast, FL 32137 City State Zin Code								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 617							
(4)	Check appropriate box(es):								
		ty Council Member District 2							
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded							
		Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	t Identifiers							
Cov	er Period: From 6 / 18 / 2022 To								
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
	<u>-</u>	Monetary							
Casl	h & Checks \$, , 0 . 00	Expenditures \$,1 , <u>056</u> . <u>00</u>							
Loor	\$ 0 00	Townsteen to							
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
Tota	al Monetary \$, , 0.00	Office Account \$, , , 0 . 00							
TUta	il Morietary ,,,	Total Monetary \$, 1 ,056 .00							
In-Ki	ind \$, , 0.00	, , ,							
HEN	mu	(8) Other Distributions							
	,	\$							
		,,,,							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>1</u> , <u>105</u> . <u>00</u>	\$							
	(11) Gert It is a first degree misdemeanor for any pers	tification son to falsify a public record (ss. 839.13, F.S.)							
١c	certify that I have examined this report and it is true, corn								
l sorting that the to examine a the report and it is true, correct, and complete.									
	ype name)	(Type name)							
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)							
3.4									
<u>X</u>		X							
Si	ignature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Shauna C. Kanter			z) I.D. Numbe	er6	517
	6/18/2022		7/1/2022		_	
(3) Cover Perio	od / /	through	11	(4) Pag	e 1	of 0
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name	(-)	CES	(:-)	C- 12	(-)
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation		Description	Amendment	Amount
Number	City, State, Zip Code	Type Occupation	туре	Description	7 anonamon	Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Shau	ına C.	. Kar	iter				(2) I.D. Nur	nber	(517	
	6/	18/2	022		7/1/202	22			-			
(3) Cover Period	d	1	1	through	1	1	. (4) Page	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
6/21/2022	City of Palm Coast, City of Palm 160 Lake Ave Palm Coast, Fl 32164	campaign fee to city of palm coast to qualify.	МО	Add	\$960.00
6/21/2022	City of Palm Coast , City of Palm 160 Lake Ave Palm Coast, Fl 32164	election assessment fee for \$96, to qualify.	МО	Add	\$96.00
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DS-DE 14 (Rev					