CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Palm Coast Democratic Club	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	PO Box 35172	Submitted on:						
	Address (number and street)	10/24/2022 22:23:17 (eastern)						
	Palm Coast, Fl 32135							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:557						
(4)	Check appropriate box(es):							
	Candidate Office Sought:							
	☒ 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	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cov	er Period: From 10 / 15 / 2022 To							
	Priginal Amendment Spo	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Casl	h & Checks \$, , 51 . 00	Expenditures \$, , _90 . 00						
امما	ns \$,,,000	Transferate						
Loar	is	Transfers to Office Account \$, , 0 . 00						
Tota	Il Monetary \$, , 51 . 00	,,,						
Tota	,,,	Total Monetary \$, , 90 . 00						
In-Ki	ind \$, , 0.00	, , , ,						
III-IX	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions						
		\$,,,000						
		,,,,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>30</u> , <u>105</u> . <u>32</u>						
	(11) Com	lification						
		tification on to falsify a public record (ss. 839.13, F.S.)						
Lo	certify that I have examined this report and it is true, corr	ect, and complete:						
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
<u>X</u>		<u>X</u>						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Palm Coast Democra	tic C	lub	((2) I.D. Numbe	er	557
	10/15/2022		1	0/21/2022			
(3) Cover Perio	od/////	thro	ough	11_	(4) Pag	le	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10/18/2022	SHAFFER, Lee 1 Edge Place Palm Coast, FL 32164	Ī		СН			\$15
10/15/2022	Roberson, Carolyn 42 Red Birch Lane Palm Coast, FL 32164	I		DU			\$36
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DS-DE 13 (Rev. 11/13)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES	

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Palm	Coast	Democr	atic Club			(2) I.D. Num	nber	5	557	
		10/15	/2022		10/21/	2022		-			
(3) Cover Per	riod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
10/15/2022	AACS, AACS 4422 N. US Hwy 1 Bunnell, FL 32110	meeting rental	MO		\$90.00
1	Builder, 12 Shift				
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DS-DE 14 (Rev.					