	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Fernando Melendez	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION [1314616]							
(2)	16 Rae Dr	Submitted on:							
	Address (number and street)	7/4/2024 11:34:28 (eastern)							
	Palm Coast, Fl 32164								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:660							
(4)	Check appropriate box(es):								
☐ Candidate Office Sought: County Commission District 1									
	Political Committee (PC)	Chack hare if BC or ECO has dishanded							
	 ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PT 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 Identifiers									
Cove	er Period: From 6 / 15 / 2024 To	6 / 28 / 2024 Report Type: P2							
X O		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Communication of the Nopel	Monetary							
Cash	n & Checks \$, , 50 . 00	Expenditures \$, , 0 . 00							
ouo.	7 d Griegine								
Loar	ns \$,,,000	Transfers to							
		Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , , 00								
		Total Monetary \$, , 0 . 00							
In-Kind \$, , 0 . 00									
		(8) Other Distributions							
		\$, , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, 6, 800.00	\$, 3 , _78518_							
	(11) Cert It is a first degree misdemeanor for any pers								
		, ,							
I C	ertify that I have examined this report and it is true, corr	ect, and complete:							
_(T)	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	er <u> </u>	60					
	6/15/2024		6	/28/2024	641) (3 -792)		
(3) Cover Peri	od////	_ thro	ough	<i>t t</i>	(4) Pag	ge <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6/27/2024	Nation, Kim 22 Round Table LN Palm Coast, FL 32164	I	retired	CA			\$50.0
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j j							
1 1							
f I							
1 1							

(1) Name <u>Fernar</u>	ndo Melendez		IZED EXPENDITURES (2) I.D. Number660			
3) Cover Period _	6/15/2024 /through	6/28/2024	(4) Page1	of	0	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sough contribution to candidate)	(9) at if a Expenditure Type	(10)	(11) Amount	
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