	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Shelly Edmonson	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	11 Westmount Ln	Submitted on:						
	Address (number and street)	7/15/2024 10:32:31 (eastern)						
_	Palm Coast, FL 32164							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 682						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: Tax Collector							
	Political Committee (PC)	Check here if PC or FCO has dishanded						
		• =						
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	dentifiers						
Cove								
	er Period: From $\frac{1}{2}$ / $\frac{1}{2024}$ To							
∐ Or	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
	1	Monetary						
Cash	n & Checks \$, , 0 . <u>00</u>	Expenditures \$, , 0 . 00						
•	¢ 410 27							
Loans	s \$,, <u>410</u> . <u>37</u>	Transfers to Office Account \$						
T-4-1	\$ 410 37	Office Account \$, , , 0 . 00						
lotai	Monetary \$, , <u>410</u> . <u>37</u>	Total Monetary \$. 0 . 00						
I IZ:	. e _410_37	Total Monetary \$, , , 0 . 00						
In-Kir	nd \$,, <u>-41</u> 0. <u>37</u>							
		(8) Other Distributions \$, , 0.00						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>50</u> , <u>576</u> . <u>00</u>	\$, <u>3</u> , <u>516</u> . <u>57</u>						
	(11) Cert							
_	It is a first degree misdemeanor for any personal	• • • • • • •						
l ce	I certify that I have examined this report and it is true, correct, and complete:							
(Ту	/pe name)	(Type name)						
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		<u>X</u>						
Sig	anature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _{Sh}			(2		682				
	1/1/2024			3/31/	2024				
(3) Cover Period	7	1	through	1	1	(4) Page	1	of	1

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1/19/2024	Edmonson, Shelly ***Protected Voter***	I		IK	change to loan	Add	\$-81.3
1/19/2024	Edmonson, Shelly ***Protected Voter***	I		LO	office supplies	Add	\$81.3
1/19/2024	Edmonson, Shelly ***Protected Voter***	I		IK	change to loan	Add	\$-279.0
1/19/2024	Edmonson, Shelly ***Protected Voter***	I	operations mgr @ fctd	s LO	website	Add	\$279.0
2/1/2024	Edmonson, Shelly ***Protected Voter***	I		IK	change to loan	Add	\$-50.0
2/1/2024 / /	Edmonson, Shelly ***Protected Voter***	I		LO	event ticket	Add	\$50.0
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Shelly Edmonson (2) I.D. Number 682							
	1/1/2024 3/3 / through	31/2024	4) Page <u>1</u>		0		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount		
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