	CAMPAIGN TREASURER'S REPORT SUMMARY						
(1)	Janie Ruddy	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	7 Sedan PL	Submitted on:					
	Address (number and street)	8/30/2024 12:40:48 (eastern)					
	Palm Coast, FL 32164 City, State, Zip Code						
	_	(3) ID Number: 709					
(4)	Check here if address has changed	(3) ID Number: 709					
(4)	Check appropriate box(es):						
		District 3					
		☐ Check here if PC or ECO has disbanded					
	☐ Party Executive Committee (PTY)	Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if no other IE or EC reports will be filed					
	mulvidual making electioneering communications,						
	(5) Report	Identifiers					
Cove	er Period: From 6 / 29 / 2024 To						
		ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(-,	Continuations time report	Monetary					
Cast	h & Checks \$, , 25 . 00	Expenditures \$, , 0 . 00					
•		· · · · · · · · · · · · · · · · · · ·					
Loar	ns \$,,, <u>0</u> .00	Transfers to					
		Office Account \$, , 0 . 00					
Tota	Il Monetary \$, , , 2500						
		Total Monetary \$, , 0 . 00					
In-Ki	ind \$,, <u>-25</u> . <u>00</u>						
		(8) Other Distributions					
		\$, , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(-,	\$, 6, 268 . 16	\$, 5 , _686 . 52					
	, <u> </u>	, ,					
	(11) Cert						
	It is a first degree misdemeanor for any person	on 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:							
(T	ype name)	(Type name)					
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
х		X					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number				
(3) Cover Perio	6/29/2024 od////	through	/12/2024 //	(4) Pag	e <u>1</u>	of	
(5)	(7)	(8)	(9)	(10)	(11)	(12)	

4							
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_	STATE OF THE PERSON OF		Income Andreason In		
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	Amazint
Number	City, State, Zip Code Vystar,	Type B	Occupation	Type IK	Description promo for	Delete	Amount \$25.00
7/12/2024	P.O. Box 45085			IK	creating a	Delete	φ25.00
1 1	Jacksonville, FL 32234				lnew		
1					checking account		
_							
	Vvstar.	В		CA	promo for	Add	\$25.00
7/12/2024	Vystar, P.O. Box 45085			021	creating a		,
1 1	Jacksonville, FL 32234				new checking		
2					account		
							<u>,</u>
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1 1							
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F 1							
DS DE 12 / Pay 11/1	다. 19 (1921년) 1월 1일	40-001			AND CODE VAL	11000_000	70

	CAMPAIGN TREASURER'S F Ruddy		EXPENDIT 2) I.D. Number	2013003.7839	709
	6/29/2024 7/	12/2024	,		
(3) Cover Period	/through	_//(4) Page <u>1</u>	of	0
(5)	(7)	(8)	(9)	(10)	(11)
Date	Full Name	Purpose		***	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount

Number	City, State, Zip Code	candidate)	туре	Amendment	Amount
//					
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/ /					
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//					
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