CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Noah Douglas Kowieski	OFFICE USE ONLY						
` '	Name	ONLINE SUBMISSION						
(2)	120 Lasa Commons Cir.; Apt 303	Submitted on:						
	Address (number and street)	7/8/2022 04:57:50 (eastern)						
	St. Augustine, FL 32084							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1251						
(4)	Check appropriate box(es):							
	Candidate Office Sought: City of St. A	ug. Comm - Seat 3/Mayor						
	Political Committee (PC)	Charlebon # DO on FOO bon disheaded						
	☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY)	☐ 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	dentifiers						
Cove		7 / 1 / 2022 Report Type: P2						
		ecial Election Report						
		<u> </u>						
(6)	Contributions This Report	(7) Expenditures This Report						
Casł	n & Checks \$, , , 2500	Monetary						
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 500	Total Monetary \$, , 261 . 24						
In-Ki	nd \$, , 0.00							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,, <u>375</u> 00	\$, , <u>322</u> . <u>92</u>						
		tification 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:								
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		x						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Noah Douglas Kowies	ki		(2) I.D. Number							
	6/18/2022		7	/1/2022							
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e <u>1</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				
6/29/2022	Kowieski, Melissa I ***Protected Voter***		family services	СН	\$1		\$25.0				
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1 1											
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1 1											
1 1											
1 1											
1 1											
DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _N	loah	Dougla	ıs I	Kowie	ski		44604	VA. 111	 (2)	I.D. Nur	nber		1251	r
		6/18	/20	22		7/1	/202	2						
(3) Cover Po	eriod	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	Vickey Oaks SOE, 4455 Ave A, St. Augustine, FL 32084	qualifying funds	МО		\$261.24
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DS-DE 14 (Rev.	4440 1).		- Jel.