CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Michael Newman	OFFICE USE ONLY						
` '	Name	ONLINE SUBMISSION [1160643]						
(2)	10144 Newman Whitehead Rd	Submitted on:						
	Address (number and street)	7/11/2018 13:22:59 (eastern)						
	Salem, FL 32356							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:155						
(4)	Check appropriate box(es):							
	Candidate Office Sought: County Commis	sion - District 3						
	☐ 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						
Cove	er Period: From 6 / 23 / 2018 To	7 / 6 / 2018 Report Type: P2						
ĭ o		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
(0)	Contributions This Report							
Cash	n & Checks \$,, 0 . 69	Monetary Expenditures \$, , 25 . 00						
Odoi	,, <u></u> ,,,							
Loar	ns \$,,,0.00	Transfers to						
		Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 0 . 69							
		Total Monetary \$, , _25 . 00						
In-Ki	nd \$, , <u>60</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						
	\$, _4_, 401 . 39	\$, <u>3</u> , <u>016</u> . <u>31</u>						
		tification on to falsify a public record (ss. 839.13, F.S.)						
1								
I certify that I have examined this report and it is true, correct, and complete:								
_(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		×						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Michael Newman				(2) I.D. Numbe	er1	.55	
	6/23/2018		7	/6/2018				
(3) Cover Peri	od//	thro	ough	<i>l l</i>	(4) Pag	je <u>1</u>	of	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contributor		(9) Contribution	(10)	(11)	(12)	
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
7/1/2018	BCFCU, 1825 S Jefferson St. Perry , FL 32348	В		IN			\$0.6	
1								
6/28/2018	Newman, Michael E 10144 Newman Whitehead Rd Salem, FL 32356	I		IK	vehicle use		\$60.0	
2								
1 1								
f I								
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l l								
1 1								
1 1								

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Michael	Newma	ın				 (2) I.D. Nun	nber	1	55_	
	6	5/23/2	018		7/6/201	8	**				
(3) Cover P	eriod	1	1	through	/	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
6/29/2018	Supervisor of Elections, 433 US 19N	voter info	MO		\$25.00
1	Perry, FL 32347				
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DS-DE 14 (Rev.	44(40.1)				