	CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Eddie Molina	OFFICE USE ONLY ONLINE SUBMISSION									
	Name	[1164063]									
(2)	1660 Greens Dairy Rd	Submitted on:									
	Address (number and street)	7/31/2018 21:10:32 (eastern)									
	DeLand, FL 32720 City, State, Zip Code										
	_	(3) ID Number: 399									
	Check here if address has changed	(3) ID Number: 399									
(4)	Check appropriate box(es):										
	Candidate Office Sought: County Counci	1 Member, District 1									
	☐ 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	.,	7 / 27 / 2018 Report Type: P4									
	<u> </u>	ecial Election Report									
		I .									
(6)	Contributions This Report	(7) Expenditures This Report									
Cash	n & Checks \$, , <u>200</u> . <u>00</u>	Monetary									
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , 0 . 00									
Tota	I Monetary \$, , <u>200</u> . <u>00</u>	Total Monetary \$, , 865 . 00									
In-Ki	and \$, , 0.00	,, ,,									
		(8) Other Distributions									
		\$,, <u>0</u> . <u>00</u>									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$,7, _04918_	\$, <u>6</u> , <u>558</u> . <u>85</u>									
	(11) Cert It is a first degree misdemeanor for any pers										
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)									
Х		×									
	gnature	Signature									

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Eddie Molina			(2) I.D. Number				
	7/21/2018		7	/27/2018		1	1	
(3) Cover Perio	od/	thre	ough	11_	(4) Page	<u> </u>	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount	
7/26/2018	Super Inspection Pros LLC, 1420 McGregor Road DeLand, FL 32720	В	inspector	СН			\$200.0	
1	Denaitd, FE 32720							
J I								
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1 1								
1 1								
DS-DE 13 (Rev. 11/1	3)	SEE RE	EVERSE FOR I	NSTRUCTIONS	S AND CODE VALU	JES		

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Edd:	ie Molin	a				_ (2) I.D.	Numbe	r	3	399	300
	7/21/	/2018		7/27/20	18						
(3) Cover Perio	d /	1	through	1	1	(4) Pag	e 1		of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
7/27/2018	Beacon, 110 New York Ave.	advertising fee	MO		\$865.00
1	none DeLand, Fl 32720				
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DS-DE 14 (Rev.					