	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Raymond Long	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION [1167392]						
(2)	1884 Palmetto Road	Submitted on:						
	Address (number and street)	8/14/2018 09:06:15 (eastern)						
	DeLand, FL 32724  City, State, Zip Code	<del></del>						
	☐ Check here if address has changed	(3) ID Number: 548						
(4)		(9) 1D Number.						
(4)	Check appropriate box(es):  X Candidate Office Sought: West Volusia	Hospital Authority - Group A, Seat 1						
	Political Committee (PC)	HOSPITAL AUGUSTICS GLOUP A, BOUT I						
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
		Check here if PTY has disbanded						
	individual making electioneering communications)	Check here if no other IE or EC reports will be filed						
	· · ·	Identifiers						
Cove	er Period: From 8 / 4 / 2018 To	8 / 10 / 2018 Report Type: P6						
X O	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Casl	h & Checks \$ , , <u>100</u> . <u>00</u>	Expenditures \$ , , <u>12</u> . <u>78</u>						
1	<b>\$</b> 12 78	<b>-</b>						
Loar	ns \$,, <u>12</u> . <u>78</u>	Transfers to Office Account \$						
Tota	al Monetary \$ , , 112 . 78	Office Account \$ , , , 0 . 00						
1014	il Morietary , , ,	Total Monetary \$ , 12 . 78						
In-Ki	ind \$ , , 0.00	, ,, ,, ,						
		(8) Other Distributions						
		\$,, ooo						
<b>'</b> 2\								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$ , , <u>37</u> . <u>78</u>						
	(11) Cert	tification						
	It is a first degree misdemeanor for any person	on to falsify a public record (ss. 839.13, F.S.)						
Ιc	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)						
or	electioneering comm.)							
Х		×						
	ignature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Raymond Long		(2) I.D. Number					
	8/4/2018			/10/2018				
(3) Cover Per	iod / /	thro	ough	<i>l l</i>	(4) Page	1	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address &		ontributor	Contribution	In-kind	Amendment	Amount	
8/8/2018 /	City, State, Zip Code BAUMGARTNER, ROGER 2300 PIN OAK DRIVE DELAND, FL 32720	Type I	Occupation	Type CH	Description	Amendment	Amount \$100.	
1								
8/9/2018	LONG, RAYMOND 1884 PA; METTO ROAD DELAND, FL 32724	S		LO			\$12.	
2								
1 1								
1 1								
1 1								
1 1								
1 1								
1 1								

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Raymo	ond Long	3				(2	) I.D. Nur	nber		548	
	8/4/2	018		8/10/20	018		•				
(3) Cover Period		1	through	1	1	(4	) Page	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
8/9/2018	EXPRESS PRINTING, 865 W. NEW YORK AVE DELAND, FL 32724	flyers	MO		\$12.78
1					
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