	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1) (2)	Stan Schmidt Name 5574 Trail Side Drive	OFFICE USE ONLY ONLINE SUBMISSION [1166763]							
	Address (number and street) Port Orange, FL 32127 City, State, Zip Code Check here if address has changed	Submitted on: 8/10/2018 15:07:52 (eastern) (3) ID Number: 549							
(4)									
	(5) Report	Identifiers							
		8 / 3 / 2018 Report Type: P5							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$,1 , <u>050</u> . <u>00</u>	Monetary Expenditures \$, , , 0 . 00							
Loar Tota	\$	Transfers to Office Account \$, , , 0 . 00							
In-Ki	nd \$,, <u>0</u> .00	Total Monetary \$, , 0 . 00							
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date \$,11 , _95500	(10) TOTAL Monetary Expenditures To Date \$,9 ,53277							
(Ty	(11) Cert It is a first degree misdemeanor for any personant it is true, correctify that I have examined this report and it is true, corresponding to the latest property of the latest personant in t	on to falsify a public record (ss. 839.13, F.S.) ect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)							
Sig	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Stan Schmid	t.			(2	2) I.D. Number _		549	
	7/28/20)18		8/3/2	018				
(3) Cover Perio	d /	1	throuah	1	1	(4) Page	1	of ¹	L

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/31/2018	Taylor, Curtis 500 Moon Rise Dr Port Orange, FL 32127	Î		СН			\$100.0
8/1/2018	Paytas Homes, Inc, 794 Sanders Road, Unit 1 Port Orange, Fl 32127	В	home builder	СН			\$500.0
8/1/2018	Ultra Beauty, Inc., 794 Sanders Road Port Orange, Fl 32127	В	home improvemer ts	CH			\$150.0
8/3/2018 / /	Donadio, Raymond & Deborah 6079 Sanctuary Garden Blvd Port Orange, FL 32128	I	attorney	СН			\$300.0
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(1) Name Stan S	AMPAIGN TREASURER'S Schmidt		(2) I.D. Number		549
(3) Cover Period _	7/28/2018 /through	8/3/2018 	(4) Page <u>1</u>	of	0
(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)
(6) Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount
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