CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Al Bouie	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1181427]							
(2)	P.O. Box 922								
	Address (number and street)	Submitted on:							
	DeLand, FL 32721	12/10/2018 16:18:58 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:552							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: School Board Member, District 1 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	Identifiers							
Cove	er Period: From <u>11</u> / <u>3</u> / <u>2018</u> To	11 / 30 / 2018 Report Type: M11							
<u>X</u> 0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , <u>250</u> . <u>00</u>	Monetary Expenditures \$,2 , _00000							
Loar	s , , ,	Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , <u>250</u> . <u>00</u>	Total Monetary \$, 2 , 000 . 00							
In-Ki	nd \$,,, _0 . 00								
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>23</u> , <u>160</u> . <u>60</u>	\$, <u>22</u> , <u>111</u> . <u>82</u>							
(11) Certification It is a first degree misdemeanor for any person 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: (Type name) Individual (only for IE Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY)									
or	electioneering comm.)								
X		<u>X</u>							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Al Bouie				2) I.D. Numbe	er <u> </u>	552
	11/3/2018			1/30/2018			
(3) Cover Perio	od / /	thro	ough	11_	(4) Pag	je ¹	of ¹
1005 98			14400				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
11/5/2018	DAVIS, FOUNTAINE 216 S ATLANTIC AVE		school	CH			\$250.0
1 1	DAYTONA BEACH, F 32118		board				
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1 1	-						
1 1	-						
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Al B	ouie					(2) I.D. Nun	nber	5	552	
	11/3/2	2018		11/30/2	2018					
(3) Cover Period	<i>I</i>	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
11/13/2018	VOLUSIA STRATEGIES INC, 927 BEVILLE RD SUITE 110 SOUTH DAYTONA , FL 32119	campaign expenses	MO		\$2,000.00
1	BOOTH BATTONA , TE 32113			-	
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DS-DE 14 (Rev.	4442.1		,		