CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Christine Wilt OFFICE USE ONLY								
Name [1179403]	ON							
(2) 412 Brookfield Terrace								
Address (number and street)Submitteed off:DeLand, FL 3272411/5/2018 14:58:03 (east	ern)							
City, State, Zip Code								
	<b>1</b> 6							
(4) Check appropriate box(es):								
Candidate Office Sought: Soil & Water Conservation District, Seat 3								
Political Committee (PC)								
<ul> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Check here if PC or ECO has disbanded</li> <li>Check here if PTY has disbanded</li> </ul>								
☐ 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								
Cover Period: From <u>10</u> / <u>20</u> / <u>2018</u> To <u>11</u> / <u>1</u> / <u>2018</u> Report Type:	G7							
Original Amendment Special Election Report								
(6) Contributions This Report (7) Expenditures This Report								
Monetary								
Cash & Checks         \$	. 00							
\$ 0.00 <del>-</del> ( )								
Loans \$,, 0. 00 Transfers to Office Account \$, 0	0.0							
Total Monetary \$ , , 0.00	<u> </u>							
Total Monetary \$,	. 00							
In-Kind \$ , , 0.00								
(8) Other Distributions								
\$,,	0							
(9) TOTAL Monetary Contributions To Date (10) TOTAL Monetary Expenditures To	Date							
\$, <u>200</u> . <u>00</u> \$, <u>154</u> . <u>5</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)       (Type name)         Individual (only for IE       Treasurer       Deputy Treasurer         Candidate       Chairperson (only for PC)	and PTV)							
or electioneering comm.)	anu = 11)							
x x								
Signature     Signature	and a second							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Christine Wilt		(2) I.D. Number <sub>546</sub>				
10/20/2018			11/1/2018				
(3) Cover Perio	/ bc	thro	ough	11	(4) Pag	e _ 1	of <sup>0</sup>
1				I			
(5)	(7)	(8)		(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Contributor		Contribution	In-kind		_
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	-						
			-				
1 1	-						
1 1	-						
55 #3							
1 1	-						
1 1	-						
1 1	-						
1 1							
	-						
1 1							
	-						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Christine Wilt (2) I.D. Number 546							
(3) Cover Period	10/20/2018 /through	11/1/2018	4) Page <u>1</u>	of	0		
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Purpose (add office sought if contribution to a	(9) Expenditure	(10)	(11)		
Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount		
_/_/							
_/ /							
_/_/							
_/ /							

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES