

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Quanita May  
 Name  
 (2) 115 Magnolia Avenue  
 Address (number and street)  
Daytona Beach, FL 32118  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1161296]

Submitted on:  
 7/13/2018 12:53:12 (eastern)

Check here if address has changed

(3) ID Number: 446

(4) Check appropriate box(es):

- Candidate Office Sought: Daytona Beach Commissioner Zone 3
- 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 individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 6 / 23 / 2018 To 7 / 6 / 2018 Report Type: P2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,   1   , 000 . 00

Loans \$      ,      ,   0   . 00

Total Monetary \$      ,   1   , 000 . 00

In-Kind \$      ,      ,   0   . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,   4   , 211 . 50

Transfers to Office Account \$      ,      ,   0   . 00

Total Monetary \$      ,   4   , 211 . 50

### (8) Other Distributions

\$      ,      ,   0   . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,   22   , 650 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,   6   , 072 . 77

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Quanita May (2) I.D. Number 446

6/23/2018 through 7/6/2018

(3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 1 of 1

| (5)<br>Date      | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type Occupation |          | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|------------------|--|---------------------------------------|----------|-----------------------------|--------------------------------|-------------------|----------------|
| 6/28/2018<br>/ / | Lloyd, Robert W<br>PO Box 2412<br>Daytona Beach, FL 32115                                      | I                                     | attorney | CH                          |                                |                   | \$1,000.00     |
| 1                |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |
| / /              |  |                                       |          |                             |                                |                   |                |

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

(1) Name Quanita May

(2) I.D. Number 446

(3) Cover Period 6/23/2018 through 7/6/2018

(4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |  |                            |                   |                |
| 7/3/2018<br>/ /           | County of Volusia ,<br>125 West York<br>Deland, FL 32724                                       | fee  | MO                         |                   | \$38.50        |
| 1                         |  |  |                            |                   |                |
| 7/3/2018<br>/ /           | Lamar ,<br>1140 N Williamson Blvd<br>Daytona Beach, FL 32114                                   | advertising sign   | MO                         |                   | \$4,173.00     |
| 2                         |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |