

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Phyllis Butlien  
Name

(2) 144 Verde Way  
Address (number and street)

DeBary, FL 32713  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1162566]

Submitted on:  
7/25/2018 12:26:32 (eastern)

Check here if address has changed

(3) ID Number: 487

(4) Check appropriate box(es):

- Candidate Office Sought: DeBary Council Seat 4
- 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 7 / 7 / 2018 To 7 / 20 / 2018 Report Type: P3

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 120 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 120 . 00

In-Kind \$        ,        , 30 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 29 . 08

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 29 . 08

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 325 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 210 . 41

### (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 Phyllis Butlien (2) I.D. Number 487  
 (3) Cover Period 7/7/2018 through 7/20/2018 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
7/10/2018 / /	Hartshorn, Cathy 1 Orchid Dr DeBary, FL 32713	I	therapist	CH			\$20.00
1							
7/14/2018 / /	Barto, Marla withheld withheld, fl 00000	I	sales	CH			\$100.00
2							
7/10/2018 / /	Brown, Joanna 26 Hibiscus Dr DeBary, FL 32713	I	teacher	IK	transfer lettering		\$30.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Phyllis Butlien

(2) I.D. Number 487

(3) Cover Period 7/7/2018 through 7/20/2018

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
7/14/2018 //	Paypal, P.O Box 71202 Charlotte, NC 28272	electronic transfer fee	MO		\$3.20
1					
7/10/2018 //	Paypal, P.O Box 71202 Charlotte, NC 28272	electronic transfer fee	MO		\$0.88
2					
7/15/2018 //	Saxon Logistics, 554 Woodford Dr DeBary, FL 32713	debate fee	MO		\$25.00
3					
//					
//					
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//					
//					
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