

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert McFall  
 Name  
 (2) 1401 Clipper Terrace  
 Address (number and street)  
Deltona, FL 32725  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1181187]

Submitted on:  
 12/7/2018 07:57:21 (eastern)

Check here if address has changed

(3) ID Number: 516

(4) Check appropriate box(es):

- Candidate Office Sought: Deltona Commission District 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 1 / 1 / 2018 To 12 / 31 / 2018 Report Type: TRG

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 100 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 100 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      , 6 , 692 . 53

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      , 6 , 692 . 53

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 11 , 205 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      , 11 , 205 . 00

### (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 Robert McFall (2) I.D. Number 516  
 (3) Cover Period 1/1/2018 through 12/31/2018 (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>Contributor<br>Type Occupation |  | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|------------------|--|---------------------------------------|--|-----------------------------|--------------------------------|-------------------|----------------|
| 12/6/2018<br>/ / | City of Deltona,<br>2345 Providence Blvd.<br>Deltona, FL 32725                                 | O                                     |  | RE                          |                                |                   | \$100.00       |
| 1                |  |                                       |  |                             |                                |                   |                |
| / /              |  |                                       |  |                             |                                |                   |                |
| / /              |  |                                       |  |                             |                                |                   |                |
| / /              |  |                                       |  |                             |                                |                   |                |
| / /              |  |                                       |  |                             |                                |                   |                |
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| / /              |  |                                       |  |                             |                                |                   |                |
| / /              |  |                                       |  |                             |                                |                   |                |

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert McFall

(2) I.D. Number 516

(3) Cover Period 1/1/2018 through 12/31/2018

(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 |  |  |                            |                   |                |
| 12/7/2018<br>//           | McFall, Robert "Bob"<br>1401 Clipper Ter.<br>Deltona, Fl 32725                                 | loan<br>reimbursement  | RM                         |                   | \$6,692.53     |
| 1                         |  |  |                            |                   |                |
| //                        |  |  |                            |                   |                |
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