CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Chris Miller	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	Protected Address								
	Address (number and street)	Submitted on: 11/12/2019 11:09:10 (eastern)							
	<u>'</u>								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 588							
(4)	(4) Check appropriate box(es):								
	County Judge,	Group 6							
	Political Committee (PC)	Check have if DC as ECO has disharded							
	☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY)	☐ 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							
	individual making electioneering communications)	-							
(5) Report Identifiers									
Cove	er Period: From 9 / 1 / 2019 To	9 / 30 / 2019 Report Type: M9							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Contributions This Report								
Casl	n & Checks \$,, <u>150</u> . <u>00</u>	Monetary Expenditures \$, , , 0 . 00							
Loar	s , , , , 000	Transfers to Office Account \$							
- .	\$ 150 00	Office Account \$, , , 0 . 00							
Total Monetary \$, , <u>150</u> . <u>00</u>		Total Monetary \$. 0 . 00							
	. \$ 0.00	Total Monetary \$, , , 0 . 00							
In-Ki	nd \$, , , 0 . 00	(0) 011 5: (1) 1:							
		(8) Other Distributions \$, , 0.00							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>23</u> , <u>400</u> . <u>00</u>	\$, <u>9</u> , <u>186</u> . <u>45</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:									
. 22. 2.7 2. 22. That a statistical and report and it is true, contact, and complete.									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		x							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameChris Miller					(2) I.D. Number 588					
	9/1/201	9		9/30/	2019					
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1	

				T	T	T	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
9/26/2019 / /	Peterson, Matthew 2250 Captain Butler Trail New Smyrna Beach, FL 32168	Î		CA	received in error; donation refunded to donor at a later	Add	\$50.0
9/26/2019 / /	Peterson, Erin 2250 Captain Butler Trail New Smyrna Beach, FL 32168	I		CA	received in error; donation refunded to donor at a later	Add	\$50.0
9/26/2019	DeLoach & Peterson, 418 Canal St. New Smyrna Beach, FL 32168	В		CA	received in error; donation refunded to donor at a later	Add	\$50.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Chris Miller (2) I.D. Number 588									
	9/1/2019 9/30 /through)/2019)) Page <u>1</u>		0				
(5) Date (6) Sequence Number	(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)	(11)				
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