

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jennifer Coen
 Name
 (2) 2847 W. New York Avenue
 Address (number and street)
DeLand, FL 32720
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1202505]

Submitted on:
 3/30/2020 15:14:04 (eastern)

Check here if address has changed (3) ID Number: 638

(4) Check appropriate box(es):

Candidate Office Sought: West Volusia Hospital Authority - Group B, Seat 2

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 3 / 1 / 2020 To 3 / 31 / 2020 Report Type: M3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 273 . 60

Total Monetary \$, , 273 . 60

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 273 . 60

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 273 . 60

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 2 , 368 . 60

(10) TOTAL Monetary Expenditures To Date
 \$, , 378 . 60

(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 Jennifer Coen (2) I.D. Number 638

3/1/2020 through 3/31/2020

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (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
3/26/2020 / /	Coen, Jennifer 2255 River Ridge Road Deland, FL 32720	S	office manager	LO			\$273.60
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jennifer Coen

(2) I.D. Number 638

(3) Cover Period 3/1/2020 through 3/31/2020

(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					
3/26/2020 / /	Bluehost, 1500 North Priest Drive Tempe, AZ 85281	website	MO		\$273.60
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