

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jonathan Foley
 Name

(2) 629 Herbert Street
 Address (number and street)

Port Orange, FL 32129
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1183421]

Submitted on:
 1/31/2019 21:14:39 (eastern)

Check here if address has changed

(3) ID Number: 577

(4) Check appropriate box(es):

- Candidate Office Sought: Port Orange Council District 1
- 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 / 2019 To 1 / 31 / 2019 Report Type: M1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 460 . 00

Loans \$, , 100 . 00

Total Monetary \$, , 560 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 123 . 54

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 123 . 54

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, , 560 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 123 . 54

(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 Jonathan Foley (2) I.D. Number 577
 1/1/2019 through 1/31/2019
 (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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
1/23/2019 / /	Foley, Jonathan Reed 629 Herbert Street Port Orange, FL 32129	S	musician	LO	opening balance for checking account		\$100.00
1							
1/27/2019 / /	Greenlee-McDaniel, Lois Diane 115 Dublin Circle Port Orange, FL 32127	I	retired	CA			\$20.00
2							
1/27/2019 / /	Partin, Mary 1207 Sparton Ave Port Orange, FL 32127	I	retired	CH			\$20.00
3							
1/27/2019 / /	Foster, Martha 1125 Harms Way Port Orange, FL 32129	I	retired	CA			\$20.00
4							
1/28/2019 / /	Foley, Jonathan Reed 629 Herbert Street Port Orange, FL 32129	S	musician	MO			\$400.00
5							
/ /							
/ /							
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/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jonathan Foley

(2) I.D. Number 577

(3) Cover Period 1/1/2019 through 1/31/2019

(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					
1/28/2019 / /	Co., Vintage Paper 3818 S Nova Road STE C Port Orange, FL 32127	paper products(busine ss cards, flyers, and signage)	MO		\$123.54
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