CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Marilyn	Ford	OFFICE USE ONLY						
Name	ed Address	ONLINE SUBMISSION [1187277]						
(-)	(number and street)	Submitted on:						
/		4/25/2019 09:24:55 (eastern)						
City, Stat	te, Zip Code							
Check	c here if address has changed	(3) ID Number: 579						
	opropriate box(es):							
	date Office Sought: <u>Port Orange C</u>	Council District 1						
	al Committee (PC) oneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
🗌 Party E	Executive Committee (PTY)	Check here if PTY has disbanded						
	endent Expenditure (IE) (also covers an making electioneering communications)	Check here if no other IE or EC reports will be filed						
	· · · · · · · · · · · · · · · · · · ·							
(5) Report Identifiers								
	From <u>4</u> / <u>13</u> / <u>201</u> 9 To	4 / 25 / 2019 Report Type:G5						
☑ Original     □ Amendment     □ Special Election Report								
(6) Contribu	itions This Report	(7) Expenditures This Report						
	¢	Monetary						
Cash & Checks	s \$,, <u>0</u> . <u>00</u>	Expenditures \$,,,						
Loans	\$,,0.00	Transfers to						
		Office Account \$,,,0 . 00						
Total Monetary	/ \$,, <u>0</u> .00							
	<b>¢</b> 125 72	Total Monetary \$ , , , 0 . 00						
In-Kind	\$, <u>125</u> . <u>72</u>	(8) Other Distributions						
		\$,,,						
	Ionetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date \$,5,92473						
Ψ	, <u>6</u> , <u>000</u> . <u>00</u>	$\Psi \_ , \_ , \_ , \_ , \_ , \_ , \_ , \_ , \_ , \_ $						
(11) Certification								
		on to falsify a public record (ss. 839.13, F.S.)						
I certity that I	have examined this report and it is true, corr	rect, and complete:						
(Type name)		(Type name)						
Individual (on or electioneering		Candidate Chairperson (only for PC and PTY)						
v								
X Signature		X Signature						
e.griataro								

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Marilyn Ford</u>			(2) I.D. Number					
	4/13/2019				4/25/2019			
(3) Cover Per	iod / /	thre	ough	I I	(4) Page	e	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount	
4/17/2019 / / 1	Stiltner, Scott 1716 Creekwater Blvd PROTECTED ADDRESS Port Orange, FL 32129	I	sales/bus: ness owner		meet & greet refreshmen ts		\$123.7	
4/25/2019 / /	Ford, Marilyn C ***Protected***	I	retired	IK	flyer paper		\$1.9	
2								
1 1								
1 1								
1 1	_							
1 1								
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Mari	CAMPAIGN TREASURER'S	S REPORT – ITEMIZE	D EXPENDIT (2) I.D. Number		579
	4/13/2019  /through	4/25/2019 /	(4) Page <u>1</u>		0
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought i contribution to a candidate)	f Expenditure Type	Amendment	Amount
_/ /					
_ / _					
_ / /					
//					

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