CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Aaron Delgado	OFFICE USE ONLY ONLINE SUBMISSION						
	Name	[1243207]						
(2)	227 Seabreeze Blvd.	Submitted on:						
	Address (number and street)	2/2/2021 15:44:54 (eastern)						
	Daytona Beach, FL 32118  City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 612						
(4)	_	(6)						
(4) Check appropriate box(es):  \[ \times \text{ Candidate Office Sought: Daytona Beach Commissioner Zone 2} \]  \[ \times \text{ Political Committee (PC)} \]  \[ \times \text{ Electioneering Communications Org. (ECO)} \]  \[ \times \text{ Check here if PC or ECO has disbanded} \]  \[ \times \text{ Party Executive Committee (PTY)} \]  \[ \times \text{ Check here if PTY has disbanded} \]  \[ \times \text{ Independent Expenditure (IE) (also covers an individual making electioneering communications)} \]  \[ \times \text{ Check here if no other IE or EC reports will be filed} \]								
	(5) Report	l Identifiers						
Cove	er Period: From 1 / 1 / 2020 To							
	Original   ☑ Amendment  ☐ Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	h & Checks \$ , , <u>775</u> . <u>00</u>	Monetary Expenditures \$ , , <u>775</u> . <u>00</u>						
Loar		Transfers to Office Account \$ , , 0 . 00						
	al Monetary \$	Total Monetary \$ , , <u>775</u> . <u>00</u>						
In-Ki	nα Ψ,, <u>σ</u>	(8) Other Distributions \$ , , 000						
(9) TOTAL Monetary Contributions To Date \$\\ \_\  \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\								
(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								
X	ignature	X Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name					z) I.D. Numbe	er <u> </u>	512
	1/1/2020	4/1-07/02/04		/1/2021		1	1
(3) Cover Perio	od//	thro	ough	<i>l</i>	(4) Pag	e <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
2/1/2021	Gannett NSSC, PO Box 750 Fishers , IN 46038	В	advertisin g	n RE		Add	\$775.0
1							
1 1							
1 1							
J I							
J J							
J I							
J I							
1 1							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Aaron	Delgad	O				(2) I.D. Num	nber	(	612	- P
	1/1/2	020		2/1/202	1					
(3) Cover Period	1	1	through	1	I	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
2/1/2021	345 Club Inc., 796 Sanders Rd. Ste. 5 Port Orange, FL 32127	charity donation	MO	Add	\$775.00
1				5	
//					
_//_					
//					
//					
//					
DS-DE 14 (Rev.					