

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
 [1243969]

Submitted on:
 2/26/2021 14:54:47 (eastern)

Check here if address has changed

(3) ID Number: 727

(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 / 2021 To 1 / 31 / 2021 Report Type: M1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 6 . 20

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 6 . 20

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 5 , 355 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 152 . 20

(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 727

1/1/2021 through 1/31/2021

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jonathan Foley

(2) I.D. Number 727

(3) Cover Period 1/1/2021 through 1/31/2021

(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
1/28/2021 / / 1	Supervisor of Elections , Volusia County 1750 S. Woodland Blvd Deland, FL 32720	qualifying fess from the county	MO	Add	\$6.20
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					