

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Harold Briley

Name

(2) 902 Village Drive

Address (number and street)

Ormond Beach, FL 32174

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 968

(4) Check appropriate box(es):

☒ Candidate Office Sought: Ormond Beach Commission Zone 4

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

OFFICE USE ONLY  
ONLINE SUBMISSION  
[1307875]

Submitted on:

6/10/2024 08:39:40 (eastern)

### (5) Report Identifiers

Cover Period: From 4 / 1 / 2024 To 5 / 31 / 2024 Report Type: Q2

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        , 5 , 000 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        , 5 , 000 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 13 , 950 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 0 . 00

### (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 Harold Briley (2) I.D. Number 968  
 4/1/2024 5/31/2024  
 (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						
5/31/2024 / /	Lydecker, Charles 607 N. Beach St. Ormond Beach, FL 32174	I insurance executive	CH			\$1,000.00
1						
5/31/2024 / /	Lydecker, Christine 607 N. Beach St. Ormond Beach, FL 32174	I homemaker	CH			\$1,000.00
2						
5/31/2024 / /	CSG - Corp. Services, CSG - Corp. Services 2 Aquarium Dr. Camden, NJ 08103	B insurance	CH			\$1,000.00
3						
5/31/2024 / /	Foundation Risk Partners, Corp, 4634 Gulfstarr Dr. Destin, FL 32541	B insurance	CH			\$1,000.00
4						
5/31/2024 / /	Foundation Risk Partners, Corp, 9690 Deereco Rd. Suite 650 Timonium, MD 21093	B insurance	CH			\$1,000.00
5						
/ /						
/ /						
/ /						

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Harold Briley

(2) I.D. Number 968

(3) Cover Period 4/1/2024 through 5/31/2024

(4) Page 1 of 0

(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
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