CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Arun Iyampillai	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION [1298965]								
(2)	1 Mar Azul North									
	Address (number and street)	Submitted on: 8/5/2023 08:23:35 (eastern)								
	Ponce Inlet, FL 32127									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 937								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: Ponce Inlet Council Seat 3 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 									
	(5) Report	Identifiers								
Cove	er Period: From 7 / 29 / 2023 To	8 / 4 / 2023 Report Type: P6								
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$, , ,000	Monetary								
Loar	s , <u>1</u> , <u>000</u> . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$,1 , <u>000</u> . <u>00</u>	Total Monetary \$,1 , <u>577</u> . <u>07</u>								
In-Ki	nd \$,,,000									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>5</u> , <u>507</u> . <u>83</u>								
(T <u>)</u>	(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 Deputy Treasurer Candidate Chairperson (only for PC and PTY) or electioneering comm.)									
Х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Arun Iyampillai			(2) I.D. Number937					
	7/29/2023			/4/2023					
(3) Cover Perio	od//	thro			(4) Page	1	of ¹		
1004 MB			1450						
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)				Ener Anthrope				
Sequence Number	Street Address & City, State, Zip Code		ontributor Occupation	Contribution	In-kind Description	Amendment	Amount		
Number	Iyampillai, Arun		veterinar:	Type LO	Description	Amendment	\$1,000.0		
8/4/2023	1 Mar Azul N		an				, , , , , , , , , , , ,		
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DS-DE 13 (Rev. 11/1:	3)	SEE RE	EVERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name A	run	Iyampil	lai			, , , , , , , , , , , , , , , , , , ,	 (2) I.D. Nur	nber	9	337	
		7/29/2	2023		8/4/202	23					
(3) Cover Pe	riod	I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
8/4/2023	The Print House, 4460 Ridgewood Ave Port Orange, FL 32127	printing	МО		\$848.03
1					
8/4/2023	USPS, 725 Dunlawton Ave Port Orange, FL 32127	postage	MO		\$729.04
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