		The state of the s					
CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Russell Owen	OFFICE USE ONLY					
(2)	Name 609 Hidden Pines Blvd	OFFICE OF THE CITY CLERK					
(2)	Address (number and street)	DATE 6/29/2018					
	New Smyrna Beach FL 32168	10 TABLES 0 100 100 100 100 100 100 100 100 100					
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:					
(4)	Check appropriate box(es):  Clandidate Office Sought: Mayor, New Smy	rna Beach					
	<ul> <li>✓ Candidate Office Sought: Mayor, New Smy</li> <li>✓ Political Committee (PC)</li> </ul>	mia beach					
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
	☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed☐					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cov	Marie	06. / 22. / 2018 Report Type: P1					
	Driginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
	0.040.00	Monetary					
Cas	h & Checks \$ , , 2,610.00	Expenditures \$ , , 538,60					
Loa	ns \$ , , .	Transfers to					
		Office Account \$ , ,					
Tota	al Monetary \$ , , 2,610,00	T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					
l= 1/	ind \$ , 74.49	Total Monetary \$ , , 538.60					
In-K	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions					
		\$ , ,					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(0)	\$ , , 2,610,00	\$ , 538.60					
(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) Russell Owen							
Е	Individual (only for IE  Treasurer Deputy Treasurer	☐ Chairperson (only for PC and PTY)					
0	r electioneering comm.)						
X		X					
S	ignature	Signature					

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Russell Owen		(2) I.D. Number				
(3) Cover Period <sup>06</sup> .	01, 2018.,	through <sup>06</sup> .	22. 2018 ,	(A) 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
06. 02/2018/ 01	Wix.com 2601 Mission Street San Francisco, CA 94110	Website	CAN		\$74.49
06. 22, 2018 02	Image Today PO Box 386 New Smyrna Beach FL 32170	Printing	CAN		\$172.54
06. 21, 2018 03	City of New Smyrna Beach 210 Sams Avenue New Smyrna Beach FL 32168	Candidate State Assessment Fee	CAN	,	\$223.18
06. 21, 2018	County of Volusia Supervisor of Elections 125 W New York Ave Deland Florida 32720	Signature petition verification and voter information	DPV		\$53.00
06. 22, 2018 05	Paypal Corp HQ 2211 North First Street San Jose CA. 95131	Transaction Fees	CAN		\$15.39
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Russell	(2) I.D. Number					
(3) Cover Period	06. 01. 2018	through 06. 22.	2018 /	_ (4) Page	1	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)	(9)	(10) In-kind	(11)	(12)
06. 07. 2018	City, State, Zip Code Patricia Tudeen 2409 Saxon Dr. New Smyrna Beach FL 32169	Type Occupation	Type Che	Description	Amendment	Amount \$10.00
06. 08. 2018	Sally Gillespie 610 N. Peninsula Ave New Smyrna Beach FL 32169	l Retired	Che			\$500.00
06 12 2018	Nancy Eddy 1315 Redbourne Ln Ormond Beach, FL 32174	l Retired	Che			\$500.00
06. 13. 2018	J. Michael Eddy 1315 Redbourne Ln Ormond Beach, FL 32174	l Retired	Che			\$500.00
06. 16. 2018	Ray Eddy 45 Seton Trail Ste 100 Ormond Beach, FL 32176	I Retired	Che		-	\$500.00
06. 21. 2018	Richard Kolodinsky 1305 N. Atlantic Ave New Smyrna Beach, FL 32169	Attorney	Che	a.	2	\$500.00
06. 06. 2018	Russell Owen 609 Hidden Pines Blvd New Smyrna Beach, FL 32168	S Software Consul	t Cas			\$100.00

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name Russell Owen (2) I.D. Number							
(3) Cover Period	06. 01. 2018	throu	ogh/	2018 /	_ (4) Page	2	of <sup>2</sup>
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
06. 02. 2018	Russell Owen 609 Hidden Pines Blvd New Smyrna Beach FL 32168		Software Consul		Website		74.49
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES