

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kevin Crystal
 Name
 (2) 152 Roosevelt Ave
 Address (number and street)
DeFuniak Springs, FL 32435
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1186698]

Submitted on:
 4/8/2019 11:53:14 (eastern)

Check here if address has changed (3) ID Number: 473

(4) Check appropriate box(es):

Candidate Office Sought: City Council, Seat #3

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

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

(5) Report Identifiers

Cover Period: From 3 / 29 / 2019 To 4 / 5 / 2019 Report Type: G3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 200 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 200 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 6 . 10

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 6 . 10

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 10 , 875 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 10 , 145 . 17

(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 Kevin Crystal (2) I.D. Number 473

3/29/2019 through 4/5/2019

(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		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
4/5/2019 / /	Moore, Elizabeth 450 Magnolia Ave Panama City, FL 32401	B	consultant	CH		Add	\$200.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kevin Crystal

(2) I.D. Number 473

(3) Cover Period 3/29/2019 through 4/5/2019

(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
(6) Sequence Number					
4/5/2019 / /	Stripe, 510 Townsend St San Francisco, CA 94103	online payment processor	MO	Add	\$6.10
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