

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY

(1) Mike Scudiero
Name

(2) 42 Circle Creek Way
Address (number and street)

Ormond Beach, FL 32174
City, State, Zip Code

Rec'd 9/27/10

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Ormond Beach City Commission, Zone 3
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 9 / 11 / 10 To 9 / 24 / 10 Report Type G2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 300.00

Loans \$ _____

Total Monetary \$ 300.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 2,196.64

Transfers to Office Account \$ _____

Total Monetary \$ 2,196.64

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 10,430.00

(10) TOTAL Monetary Expenditures To Date

\$ 7,684.08

(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) Mike Scudiero

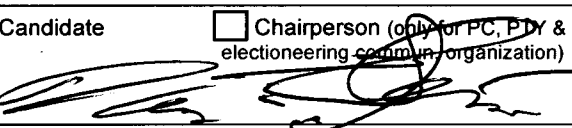
Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X 
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Mike Scudiero

Candidate Chairperson (only for PC, PDY & electioneering commun. organization)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Mike Scudiero (2) I.D. Number _____

(3) Cover Period 9 / 11 / 10 through 9 / 24 / 10 (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		Type	Occupation	Type	Description	Amendment	Amount
9 / 14 / 10	Bigman, Jeff 20 Huntsman Lk Ormond Beach, FL 32174	I	Attorney	CHE			100.00
1							
9 / 18 / 10	Vancamp, Stacy 710 Warwick PL Orlando, FL 32803	I	Legisla tive Aide	CHE			100.00
2							
9 / 22 / 10	Politis, Paul 6 Echo Woods Way Ormond Beach, FL 32174	I	Busines s Owner	CHE			100.00
3							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Mike Scudiero

(2) I.D. Number _____

(3) Cover Period 9 / 11 / 10 through 9 / 24 / 10

(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					
9 / 20 / 10	Direct Mail Systems 12450 Automobile Dr. Clearwater, FL 33762	Direct Mail	MON		\$2,196.64
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