

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) DWIGHT C. SELBY
 Name
 (2) 1535 Oak Forest Drive
 Address (number and street)
Ormond Beach FL 32174
 City, State, Zip Code

OFFICE USE ONLY

Wed 6/1/2016 10:04 AM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: COMMISSIONER - ZONE 1
- 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

(5) Report Identifiers

Cover Period: From 02 / 01 / 16 To 02 / 29 / 16 Report Type: 2016 M2 Amended

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 510 . 00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 510 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 3 , 721 . 13

(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) PATRICIA HAZARD

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Patricia Hazard
 Signature

(Type name) DWIGHT C. SELBY

Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DWIGHT C. SELBY

(2) I.D. Number _____

(3) Cover Period 02/01/16 / ____ / ____ through 02/29/16 / ____ / ____

(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					
02/01/16 / /	Gateway Bank	Bank Fee			
6			MON	ADD6	10.00
02/29/16 / /	Tony Welch 922 Ridgewood Ave Daytona Beach FL 32114	Videographer			
7			CHE	ADD7	500.00
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