

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS

RECEIVED

(1) Jim Neely  
Candidate, Committee or Party Name

(2) 09/04/19 PM 1:40  
O.P.D. Number

(3) 521 Nutmeg Cir Deland FL 32724  
Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):

Candidate (office sought): WVHA Group A Seat 1

Political Committee  Check if PC has DISBANDED

Committee of Continuous Existence  Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 9/29/00 To 10/13/00 Report Type G2

Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-kind \$ \_\_\_\_\_

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ \_\_\_\_\_

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

(8) Other Distributions \$ \_\_\_\_\_

(9) TOTAL Monetary Contributions to Date  
\$ 1,112.00

(10) TOTAL Monetary Expenditures to Date  
\$ 1,061.18

(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

James Armstrong

Name of  Treasurer  Deputy Treasurer

James Armstrong  
Signature

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

Jim Neely

Name of  Candidate  Chairman (PC/PTY Only)

Jim Neely  
Signature