

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

(1) <u>Joie Alexander</u>	(2) _____
Candidate, Committee or Party Name	I.D. Number
(3) <u>1930 Seculeion Drive</u> <u>Daytona Beach</u>	<u>Florida</u> <u>32128</u>
Address (number and street) City	State Zip Code
<input type="checkbox"/> Check box if address has changed since last report	
(4) Check appropriate box(es):	
<input checked="" type="checkbox"/> Candidate (office sought): <u>for Volusia County Council Member at Large</u>	
<input type="checkbox"/> Political Committee	<input type="checkbox"/> Check if PC has DISBANDED
<input type="checkbox"/> Committee of Continuous Existence	<input type="checkbox"/> Check if CCE has DISBANDED
<input type="checkbox"/> Party Executive Committee	

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 SUPERVISOR OF ELECTIONS
 VOLUSIA COUNTY, FL

(5) REPORT IDENTIFIERS

Cover Period: From 01 / 01 / 02 To 03 / 31 / 02 Report Type Q1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$, 20 , 540 . 00

Loans \$ _____ , _____ . _____

Total Monetary \$, 20 , 540 . 00

In-kind \$ _____ , _____ , 400 . 44

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____ , _____ , 999 . 04

Transfers to Office Account \$ _____ , _____ . _____

Total Monetary \$ _____ , _____ , 999 . 04

(8) Other Distributions \$ _____ , _____ . _____

(9) TOTAL Monetary Contributions to Date

\$ _____ , 20 , 540 . 00

(10) TOTAL Monetary Expenditures to Date

\$ _____ , _____ , 999 . 04

(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

Roben W. Smith

Name of Treasurer Deputy Treasurer

X Roben W. Smith
Signature

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

Joie Alexander

Name of Candidate Chalman (PC/PTY Only)

X Joie Alexander
Signature