

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

(1) Vonzelle Johnson Campaign
Name

(2) 520 W. Winnemissett Ave.
Address (number and street)

DeLand, FL 32720
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City Commissioner Seat 3

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 8 / 19 / 10 To 11 / 16 / 10 Report Type TR

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 6,235.39

(10) TOTAL Monetary Expenditures To Date

\$ 6,235.39

(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) Ethel Thomas

Individual (only for independent campaign) Treasurer Deputy Treasurer

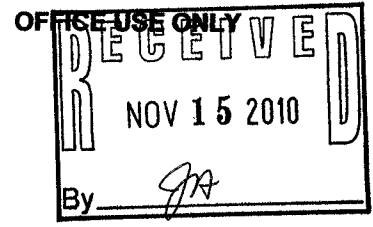
X Ethel Thomas
Signature

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

(Type name) Vonzelle Johnson

Candidate Chairperson (only for PC, PTY & file of ones-inc, not-inc, organization)

X Vonzelle Johnson
Signature



CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Vonzelle Johnson Campaign

(2) I.D. Number _____

(3) Cover Period 8 / 19 / 10 through 11 / 16 / 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					
11/15/10	Spring Hill Neighborhood Assoc. 918 S. Adelle Ave. Deland, FL 32920		Contribution		\$4.42
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