

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Scott Long

Name

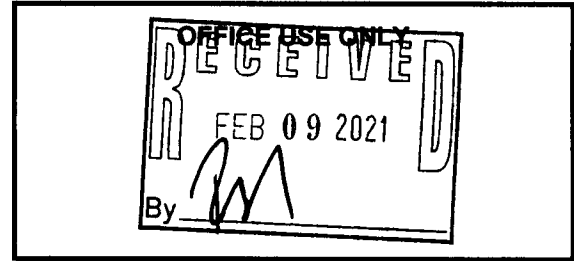
(2) 3110 Hillside Lane

Address (number and street)

Safety Harbor, FL 34695

City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Safety Harbor City Commission Seat #3

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 2 / 1 / 21 To 2 / 5 / 21 Report Type: G1-21

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , 1 , 000 . 00

Total Monetary \$ _____ , 1 , 000 . 00

In-Kind \$ _____ , _____ , 750 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 1 , 762 . 49

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , 1 , 762 . 49

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 6 , 446 . 05

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 5 , 319 . 59

(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) Scott Long

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

X

Signature

(Type name) Scott Long

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Scott Long (2) I.D. Number _____

(3) Cover Period 2 / 1 / 21 through 2 / 5 / 21 (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		Amount
2 / 2 / 21 1	Long, Scott 3110 Hillside Lane Safety Harbor, FL 34695	S	Bus. Owner.	LOA			\$1,000
2 / 5 / 21 2	Greybird AV LLC 135 10th Ave. N, Safety Harbor, FL 34695	B	Video prod.	INK	Video prod.		\$750
/ /							
/ /							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Scott Long

(2) I.D. Number _____

(3) Cover Period 2 / 1 / 21 through 2 / 5 / 21

(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					
2 / 2 / 21 1	Campaign Ad-Cloud 525 S Meridian St. Indianapolis, IN 46225	Advertising	CAN		\$500
2 / 3 / 21 2	Stripe Inc. 185 Berry St., Suite 550 San Francisco, CA 94107	Credit card processing	CAN		\$1.75
2 / 3 / 21 3	GrowMail 425 E. Spruce St. Tarpon Springs, FL 34689	Direct mail	CAN		\$927.74
2 / 4 / 21 4	Campaign Ad-Cloud 525 S Meridian St. Indianapolis, IN 46225	Advertising	CAN		\$333