

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

(1) NICHOLAS T. KOVAL
Name

(2) 296 ADELAIDE ST.
Address (number and street)

DEBARY, FLORIDA 32713
City, State, Zip Code

OFFICE USE ONLY

RECEIVED

OCT 29 2010

BY: [Signature]

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): _____

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 10 / 09 / 10 To 10 / 28 / 10 Report Type G4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ -0-

Loans \$ 500.00

Total Monetary \$ -0-

In-Kind \$ -0-

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 560.05

Transfers to Office Account \$ -0-

Total Monetary \$ -0-

(8) Other Distributions \$ -0-

(9) TOTAL Monetary Contributions To Date

\$ 4,622.00

(10) TOTAL Monetary Expenditures To Date

\$ 3,915.32

(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) NICHOLAS T. KOVAL

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

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

(Type name) NICK KOVAL

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name NICK KOVAL (2) I.D. Number _____

(3) Cover Period 10 / 09 / 10 through 10 / 28 / 10 (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
10 / 25 / 10	NICHOLAS T. KOVAL 296 ADELMADE ST. DEBARY, FL. 32713	I	RETIRED	LOA			500.00
G-1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name NICK KOVAL

(2) I.D. Number _____

(3) Cover Period 10/09/10 through 10/28/10

(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
10/09/10	RACE TRAC GAS 1298 SAXON BLVD ORANGE CITY, FL 32763	GASOLINE FOR CAMPAIGN TRAVEL IN AND AROUND DEBARY DIST. 307, +			40.25
G-1					
10/14/10	THE BEACON NEWSPAPER 110 W. NEW YORK AVE DELAND, FLORIDA 32720	POLITICAL ADS IN THE BI-WEEKLY AND VOTERS GUIDE			427.80
G-2					
10/25/10	EMBROIDERY TRENDS 962 W. SR. 434 LONGWOOD FLORIDA 32750	POLITICAL "T" CAMPAIGN T SHIRTS			132.00
G-3					