

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

OFFICE USE ONLY

JUL 29 AM 8 07

(1) Clayton Miller  
Name

(2) 5882 Queen St  
Address (number and street)  
Milton FL 32570  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate (office sought): Santa Rosa County Commissioner, District 1
- Political Committee  CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence  CHECK IF CCE HAS DISBANDED
- Party Executive Committee  CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

**(5) REPORT IDENTIFIERS**

Cover Period: From 01 / 01 / 08 To 03 / 31 / 08 Report Type Q1

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ \_\_\_\_\_ 0.00

Loans \$ \_\_\_\_\_ 450.00

Total Monetary \$ \_\_\_\_\_ 450.00

In-Kind \$ \_\_\_\_\_ 120.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ \_\_\_\_\_ 681.65

Transfers to Office Account \$ \_\_\_\_\_ 0.00

Total Monetary \$ \_\_\_\_\_ 0.00

(8) Other Distributions \$ \_\_\_\_\_ 0.00

(9) TOTAL Monetary Contributions To Date  
\$ \_\_\_\_\_ 810.00

(10) TOTAL Monetary Expenditures To Date  
\$ \_\_\_\_\_ 769.65

**(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) Clayton Miller  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

X Clayton Miller  
Signature

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

(Type name) Clayton Miller  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

X Clayton Miller  
Signature