

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

SUPERVISOR OF ELECTIONS  
MILTON, FL 32570-4592  
**OFFICE USE ONLY**

2011 JAN 25 PM 2 27

(1) Prudence Caskey  
Name

(2) 4915 Ward Basin Rd  
Address (number and street)

Milton, FL 32583  
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 2
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 10 / 29 / 10 To 12 / 29 / 10 Report Type TR

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks        \$ \_\_\_\_\_

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

Total Monetary        \$ 0

In-Kind                 \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ 8.00

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

Total Monetary            \$ 8.00

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

**(9) TOTAL Monetary Contributions To Date**  
\$ 5979.11

**(10) TOTAL Monetary Expenditures To Date**  
\$ 5979.11

**(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.

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(Type name) Prudence Caskey

(Type name) Prudence Caskey

Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

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

**X** Prudence Caskey  
Signature

**X** Prudence Caskey  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Prudence Caskey

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 29 / 10 through 12 / 2 / 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 / 3 / 10	Caskey, Prudence 4915 Ward Basin Rd Milton, FL 32583	Refund of Loan	REF		\$7.92
TR1					
12 / 29 / 10	Caskey, Prudence 4915 Ward Basin Rd Milton, FL 32583	Closing of Account/Refund of Loan	REF		\$0.08
TR2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					