

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

6495 CARROLL STREET  
MILTON, FL 32570-4592  
**OFFICE USE ONLY**

2009 DEC 30 PM 1 14

(1) Mark A. Goode  
**Name**

(2) PO Box 5128  
**Address (number and street)**

Navarre, Florida 32566  
**City, State, Zip Code**

CHECK IF ADDRESS HAS CHANGED

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

**(4) Check appropriate box(es):**

Candidate (office sought): County Commissioner, Republican, District 4

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 / 01 / 2009 To 12 / 31 / 2009 Report Type Q-4

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

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

Loans \$ 100.00

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

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

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 21.38

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

Total Monetary \$ 21.38

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

(9) TOTAL Monetary Contributions To Date  
\$ M6 150 100.00

(10) TOTAL Monetary Expenditures To Date  
\$ M6 21.38 45.88

**(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) Mark A. Goode  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X**   
Signature

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

(Type name) Mark A. Goode  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

**X**   
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Mark A. Goode (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 01 / 2009 through 12 / 31 / 2009 (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
11 / 18 / 2009	Mark A. Goode PO Box 5128 Navarre, Fl 32566			Loan			100.00
1							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Mark A. Goode

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

(3) Cover Period 10 / 01 / 2009 through 12 / 31 / 2009

(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					
10 / 20 / 09	WEB.com 12808 Gran Bay Pkwy, West Jacksonville, FL 32258	Website fees	Mon		\$8.95
1					
11 / 05 / 09	Supervisor of Elections Santa Rosa County 6495 Caroline St, Suite F Milton, Fl 32570	Voter Registration CD	Mon		\$5.00
2					
11 / 25 / 09	Ryans of Pace 4955 Highway 90 Pace, FL 32571	Campaign food expenditure with SRC Republican Womens Meeting	Mon		\$7.43
3					
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