FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY 19 NS						
(1) MARK A. GOODE	6495 CARGUNE ST., OFE. F MILTON, FL OFFICE USEQNLY					
Name	2010 RUG 2 PM 12 39					
(2) PO BOX 5128	ZUIU NUO Z 111 12 03					
Address (number and street)						
NAVARRE, FLORIDA 32566						
City, State, Zip Code CHECK IF ADDRESS HAS CHANGED	(3) ID Number:					
_	(3) ID Number:					
(4) Check appropriate box(es): ✓ Candidate (office sought): COUNTY COMMISSIONER, 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 <u>07</u> / <u>17</u> / <u>2010</u> To	07 / 30 / 2010 Report Type F2					
✓ Original Amendment Special Election	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$	Monetary Expenditures \$103.22					
Loans \$1,000.00	Transfers to Office Account \$					
Total Monetary \$1,000.00	Total Monetary \$ 103.22					
In-Kind \$	103.22					
	(8) Other Distributions					
(9) TOTAL Monetary Contributions To Date \$ 6,220.01	(10) TOTAL Monetary Expenditures To Date \$5,916.96					
(11) CERT	IFICATION					
It is a first degree misdemeanor for any pers	on 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	(Type name) MARK A. GOODE					
Individual (only for electioneering commun)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)					
X // ach	X					
Signature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	MARK A.		(2)	I.D. Number		
(3) Cover Period	07 / 17 / 2010	through ⁰⁷ /	30 / 2010	(4) Page		of 1
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	Type	Description	Amendment	Amount
07 , 20 ,10	MARK GOODE PO BOX 5128 NAVARRE, FL 32566		LOA			1000.00
F-2 / 01						
1 1						
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, ,						
1 1						
1 1						
1 1						
1 1						
1 1						

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name	MARK A. GOODE (2) I.D. Number							
(3) Cover Perio	d <u>07 / 17 / 2010</u> through <u>07</u>	/_30 / 2010	4) Page	1of	1			
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Purpose (add office sought if contribution to a	(9) Expenditure Type	(10)	(11)			
Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount			
07 /28 /10	FAST SIGNS 903-A N. BEAL PKWY FT. WALTON BEACH, FL 32547	CAMPAIGN BANNERS	MON		\$103.22			
F-2 / 01								
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/ /								
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