

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

(1) Charles Elliott  
Name

(2) 5426 Hollow Oak Lane  
Address (number and street)

Pace, FL 32571  
City, State, Zip Code

**OFFICE USE ONLY**

SUPERVISOR OF ELECTIONS  
6495 CAROLINE ST., STE. 1  
MILWAUKEE, ON, FL 32570-4592

2012 OCT 4 PM 1 24

CHECK IF ADDRESS HAS CHANGED

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

(4) Check appropriate box(es):

- Candidate (office sought): Santa Rosa Cty School Board - Dist. 4
- 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 09/15/12 To 09/28/12 Report Type 62

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

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

Loans \$ 2500.00

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

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

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 1614.36

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

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

**(8) Other Distributions**

\$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ 11,943.63

**(10) TOTAL Monetary Expenditures To Date**

\$ 9,926.71

**(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)

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

Walter Sanders  
Signature

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

(Type name)

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

Charles Elliott  
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name CHARLES ELLIOTT (2) I.D. Number \_\_\_\_\_

(3) Cover Period 9, 15, 2012 through 9, 28, 2012 (4) Page \_\_\_\_\_ of \_\_\_\_\_

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
9, 24, 2012		CHARLES ELLIOTT 5426 HOLLOW OAK PALM FL 32571		LOAN				1000 <sup>00</sup>
9, 28, 2012		CHARLES ELLIOTT 5426 HOLLOW OAK PALM FL 32571		LOAN				1500 <sup>00</sup>
1	1							
1	1							
1	1							
1	1							
1	1							
1	1							
1	1							

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Charles Elliott

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

(3) Cover Period 9/15/12 through 9/28/12

(4) Page \_\_\_\_\_ of \_\_\_\_\_

(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
9/20/12	Gulf Breeze News & Splash Magazine P.O. Box 1414 Gulf Breeze, FL 32562	Advertisement	MON		937.00
1					
9/21/12	Evergreen 318 Beverly Pkwy Pensacola, FL 32505	MAIL OUTS	MON		677.36
2					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					