

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS

CAMPAIGN TREASURER'S REPORT SUMMARY

SUPERVISOR OF ELECTIONS
 6495 CAROLINE STREET, P.O. BOX 1000
 MILTON, FL 32570-4592

2012 OCT 8 PM 1 34

(1) Jim Melvin
 Name
 (2) 3893 Ward Basin Rd
 Address (number and street)
Milton FL 32588
 City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): _____
- 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 08/03/2012 To 09/30/2012 Report Type Q3
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1000⁰⁰
 Loans \$ _____
 Total Monetary \$ _____
 In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 25⁰⁰
 Transfers to Office Account \$ _____
 Total Monetary \$ _____

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ \$1000⁰⁰

(10) TOTAL Monetary Expenditures To Date
 \$ 25⁰⁰

(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) Jim Melvin
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Jim Melvin
 Signature

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

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

X Jim Melvin
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Jim Melvin (2) I.D. Number _____

(3) Cover Period 08 103 2012 through 09 130 2012 (4) Page _____ of _____

(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
08 103 2012 1	Jim Melvin 3893 WARD BASIN RD MILTON MA 02183	I RD	County Commissioner	INK	LOAN		100 ⁰⁰
08 24 2012 2	Jim Melvin 3893 WARD BASIN RD MILTON MA 02183	I	County Commissioner	INK	LOAN		900 ⁰⁰ 800⁰⁰
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Jim Melvin (2) I.D. Number _____

(3) Cover Period 08/03/2012 through 09/30/2012 (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
08/03/12	SANTA ROSA FED. CREDIT UNION P.O. Box 841 MILTON, NC 28572	Open checking Acct.	CAS		\$25.00
11					
11					
11					
11					
11					
11					
11					
11					