

CAMPAIGN TREASURER'S REPORT SUMMARY

SUPERVISOR OF ELECTIONS
6455 CAROLINE ST., STE. F
MILTON, FL 32570-4592

OFFICE USE ONLY
2014 FEB 7 PM 4 06

(1) Andrea McDermott
Name

(2) 8093 Sleepy Bay Blvd.
Address (number and street)

Navarre, FL 32566
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Santa Rosa County Commissioner, District 4

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 01/01/14 / _____ To 01/31/14 / _____ Report Type: M01

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 600.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , _____

In-Kind \$ _____ , _____ , 28.15

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 80.00

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 80.00

(8) Other Distributions
\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date
\$ _____ , _____ , 1628.15

(10) TOTAL Monetary Expenditures To Date
\$ _____ , _____ , 869.91

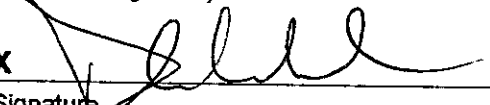
(11) Certification

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) Deborah L. Nelson

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
Signature

(Type name) Andrea McDermott

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Andrea McDermott

(2) I.D. Number _____

(3) Cover Period 01 / 01 / 14 through 01 / 31 / 14

(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					
01 / 31 / 14	Regions Bank 6650 Caroline St. Milton, FL 32570	Account Fee	MON		\$10.00
1					
01 / 01 / 14	Navarre Krewe of Jesters	Parade Float Fee	MON		\$50.00
2					
01 / 01 / 14	Main Street Milton P.O. Box 821 Milton, FL 32572	Parade Float Fee	MON		\$20.00
3					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Andrea McDermott (2) I.D. Number _____

(3) Cover Period 01 / 01 / 14 through 01 / 31 / 14 (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
(6) Sequence Number							
01 / 10 / 14	Wair, Ryne A. 4755 Marlwood Way Virginia Beach, VA 23462	I	U.S. Navy	CHE			\$300
1							
01 / 23 / 14	Campbell, Jessi A. 3748 Lexa Ct. Gulf Breeze, FL 32563	I	Realtor	CHE			\$300
2							
01 / 25 / 14	Evans, Tandra 6894 Fernandina St. Navarre, FL 32566	I	Day Care Specialist	INK	Mardi-Gras Beads		\$28.15
3							
/ /							
/ /							
/ /							
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/ /							
/ /							