

CAMPAIGN TREASURER'S REPORT SUMMARY

6495 CAROLINE CT., STE. F
 MILTON, FL 32587
OFFICE USE ONLY
 2014 AUG 22 AM 10 08

(1) Fuchsia Ann Parris Spann

Name

(2) 6596 Liberty St

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 School Board Dist 3

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 08 / 09 / 2014 To 08 / 21 / 2014 Report Type: P7

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 25.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 25.00

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 130.99

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 130.99

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 10,390.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 5,745.66

(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) Mac Spann

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

X Mac Spann
Signature

(Type name) Fuchsia Ann Parris Spann

Candidate Chairperson (only for PC and PTY)

X Fuchsia Ann Parris Spann
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Fuchsia Ann Parris Spann

(2) I.D. Number _____

(3) Cover Period 08 / 09 / 2014 through 08 / 21 / 2014

(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 / 20 / 14 (1)	Jeff Sauer 9870 N Loop Rd P'cola FL 32507	I	Attorney	CHE			25 ⁰⁰
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Fuchsia Ann Parris Spann

(2) I.D. Number _____

(3) Cover Period 08 / 09 / 2014 through 08 / 21 / 2014

(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
(6) Sequence Number					
8/11/14 (1)	Pak in Fox 8540 Navarre Pkwy Navarre FL 32566	printing	CAN		130 ⁹⁹
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