

CAMPAIGN TREASURER'S REPORT SUMMARY

SUPERVISOR OF ELECTIONS
 6495 CAROLINE ST., STE. F
 MILTON, FL 32570-4992
OFFICE USE ONLY

2014 JUL 24 AM 10 52

(1) Karen M Aloy
 Name
 (2) PO Box 6423
 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) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 07 / 05 / 14 To 07 / 18 / 14 Report Type: P3

Original Amendment Special Election Report

(6) **Contributions This Report**

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , 1 , 500 . 00

Total Monetary \$ _____ , 1 , 500 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) **Expenditures This Report**

Monetary Expenditures \$ _____ , _____ , _____ . _____

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0 . 00

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

(9) **TOTAL Monetary Contributions To Date**
 \$ _____ , 11 , 345 . 02

(10) **TOTAL Monetary Expenditures To Date**
 \$ _____ , 9 , 419 . 88

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

x Karen M. Aloy
 Signature

(Type name) Karen M Aloy
 Candidate Chairperson (only for PC and PTY)

x Karen M. Aloy
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Karen M Aloy (2) I.D. Number _____
 (3) Cover Period 07 / 05 / 14 through 07 / 24 / 14 Page 1 of 1

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 MILTON, FL 32570 (4) Page

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(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		Contribution Type	In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
07 / 14 / 14 / 1	Aloy, Karen M PO Box 6423 Navarre, FL 32566	I	Consultant	LOA			\$1,500.00