

CAMPAIGN TREASURER'S REPORT SUMMARY

SUPERVISOR OF ELECTIONS
6495 CAROLINE ST. STE. F
MILTON, OFFICE USE ONLY

2014 OCT 23 AM 10 38

(1) Wallis Lee Mahute
Name

(2) 5500 Cox Road
Address (number and street)

Milton, Florida 32583
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 2
- 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 10 / 11 / 2014 To 10 / 17 / 2014 Report Type: 2014G6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 50.00

Loans \$ _____ , _____ , 00.00

Total Monetary \$ _____ , _____ , 50.00

In-Kind \$ _____ , _____ , 00.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 25.00

Transfers to Office Account \$ _____ , _____ , 00.00

Total Monetary \$ _____ , _____ , 25.00

(8) Other Distributions

\$ _____ , _____ , 00.00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 360.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 2 , 147.11

(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) Wallis Lee Mahute

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

X Wallis Lee Mahute
Signature

(Type name) Wallis Lee Mahute

Candidate Chairperson (only for PC and PTY)

X Wallis Lee Mahute
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Wallis Lee Mahute (2) I.D. Number _____

(3) Cover Period 10 / 11 / 2014 through 10 / 17 / 2014 (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		Type	Occupation	Type	Description	Amendment	Amount
10 / 16 / 2014 G6 (1) 2014	Peanut Festival Brenda Gabbert P.O. Box 578 Jay, Florida 32565	I	Retired	REF			\$50.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Wallis Lee Mahute

(2) I.D. Number _____

(3) Cover Period 10 / 11 / 2014 through 10 / 17 / 2014

(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
10 / 17 / 2014	Gulf Breeze News Suite 35 913 Gulf Breeze Pkwy Gulf Breeze, Florida 32562	Advertising	CAN		\$25.00
G6 (1) 2014					
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