| CAMPAIGN TREASURER'S REPORT SUMMARY  |   |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| (1) Jenny Granse  Name (2) 3266 Abel Ave.  Address (number and street)  Pace, FL 32571  City, State, Zip Code  | SUPERVISOR OF ELECTIONS 6495 CAROLINE ST., STE. F MILTON, FL 32570-4592  2012 AUG 9 PM 2 01   |  |  |  |  |  |  |
| CHECK IF ADDRESS HAS CHANGED  (3) ID Number:  (4) Check appropriate box(es):  ☐ Candidate (office sought): District 4 Santa Rosa County School Board  ☐ Political Committee ☐ CHECK IF PC HAS DISBANDED ☐ Committee ☐ CHECK IF CCE HAS DISBANDED ☐ Party Executive Committee ☐ Electioneering Communication ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED |   |  |  |  |  |  |  |
|  | IDENTIFIERS  08 / 09 / 2012 Report Type F3  |  |  |  |  |  |  |
| Original Amendment Special Election  | <del></del>   |  |  |  |  |  |  |
| (6) CONTRIBUTIONS THIS REPORT  | (7) EXPENDITURES THIS REPORT  |  |  |  |  |  |  |
| Cash & Checks \$ 550.00  Loans \$ 200.00   | Monetary Expenditures \$ 270.00  Transfers to Office  |  |  |  |  |  |  |
| Total Monetary \$ 750.00   | Account \$ Total Monetary \$ 270.00   |  |  |  |  |  |  |
|  | (8) Other Distributions   |  |  |  |  |  |  |
| (9) TOTAL Monetary Contributions To Date \$ 8,700.00   | (10) TOTAL Monetary Expenditures To Date \$   |  |  |  |  |  |  |
| (11) CERT  |   |  |  |  |  |  |  |
| It is a first degree misdemeanor for any pers  I certify that I have examined this report and it is true, correct, and complete.  (Type name)  Brooke Granse  Individual (only for electioneering commun.)  Treasurer Deputy Treasurer electioneering commun.)   | I certify that I have examined this report and it is true, correct, and complete.  (Type name)  Jenny Granse  Chairperson (only for PC, PTY & election eering commun. organization)  X  Signature |  |  |  |  |  |  |
|  | Oignaturo /   |  |  |  |  |  |  |

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

| (1) Name           | Jenny Gr  | anse  |                    | (2)          | (2) I.D. Number       |                                       |                 |  |  |
|--------------------|---|-------|--------------------|--------------|-----------------------|---------------------------------------|-----------------|--|--|
| (3) Cover Period   | 07 / 21 / 2012  | throu | gh <sup>08</sup> / | 09 / 2012    | <sup>2</sup> (4) Page | 1 ,                                   | of <sup>1</sup> |  |  |
| (5)                | (7)   |       | (8)                | (9)          | (10)                  | (11)                                  | (12)            |  |  |
| <u>Date</u><br>(6) | Full Name<br>(Last, Suffix, First, Middle)                          |       |                    |              |                       |                                       |                 |  |  |
| Sequence           | Street Address &  | C     | ontributor         | Contribution | In-kind               |                                       |                 |  |  |
| Number             | City, State, Zip Code   | Туре  | Occupation         | Туре         | Description           | Amendment                             | <u>Amount</u>   |  |  |
| 07 , 21 ,2012      | Don Bowersox<br>7999 Lancelot Dr.<br>Pensacola, FL<br>32514         | I     |                    | CHE          |                       |                                       | <b>7</b> 5.00   |  |  |
| 1                  |   |       |                    |              |                       |                                       |                 |  |  |
| 07 , 30 ,2012      | Jenny Granse<br>3266 Abel Ave.<br>Pace, FL 32571                    | I     | Retired            | LOA          |                       |                                       | 200.00          |  |  |
| 2                  |   |       |                    |              |                       |                                       |                 |  |  |
| 08 / 02 2012       | Bobby Riggs<br>4141 Aiken Rd.<br>Pensacola, FL                      | I     | Insur.<br>Claims   | CHE          |                       |                                       | 250.00          |  |  |
| 3                  | 32503   |       |                    |              |                       |                                       |                 |  |  |
| 08 , 06            | Mrs. Deda Davis<br>6174 Mandie Ln.<br>Milton, FL 32570              | I     | Retired            | CHE          | -                     |                                       | 150.00          |  |  |
| 4                  |   | '     |                    |              |                       |                                       |                 |  |  |
| 08 , 08 ,2012      | Danny and Karen<br>Retherford<br>3153 Cobblestone<br>Pace, FL 32571 | I     | Retired<br>Ed.     | CHE          |                       |                                       | 50.00           |  |  |
|                    |   |       |                    |              |                       |                                       |                 |  |  |
|                    |   |       |                    |              |                       |                                       |                 |  |  |
|                    |   |       |                    | ·<br>        |                       |                                       |                 |  |  |
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|                    |   |       |                    |              |                       | · · · · · · · · · · · · · · · · · · · |                 |  |  |
| 1 1                |   |       |                    |              |                       |                                       |                 |  |  |
|                    |   |       |                    |              |                       |                                       |                 |  |  |

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

| (1) Name         | Jenny Granse |      |                           |    | (2) I.D. Number |    |        |          |   |    |   |  |
|------------------|--------------|------|---------------------------|----|-----------------|----|--------|----------|---|----|---|--|
| (3) Cover Period | 07           | , 21 | / <sup>2012</sup> through | 08 | ,               | 09 | , 2012 | (4) Page | 1 | of | 1 |  |

| (5)                       | (7)   | (8)  | (9)                 | (10)      | (11)    |
|---------------------------|---|--|---------------------|-----------|---------|
| (6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose (add office sought if contribution to a candidate) | Expenditure<br>Type | Amendment | Amount  |
| 07 /24 /12                | USPS<br>4629 Forsyth St.<br>Bagdad, FL 32530  | Postage  | MON                 |           | \$90.00 |
| 07 /30 /12                | USPS<br>4629 Forsyth St.<br>Bagdad, FL 32530  | Postage  | MON                 |           | \$90.00 |
| 08 /03 /12                | USPS<br>4629 Forsyth St.<br>Bagdad, FL 32530  | Postage  | MON                 |           | \$90.00 |
| 3                         |   |  |                     |           |         |
| //                        |   |  |                     |           |         |
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