

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) STAN COLIE NICHOLS
Name

(2) 5020 ROLAND ROAD
Address (number and street)

PACE, FL, 32571
City, State, Zip Code

OFFICE USE ONLY
SUPERVISOR OF ELECTIONS
6495 CAROLINE ST., STE. F
MILTON, FL 32570-4592

2012 SEP 5 AM 9 35

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): SANTA ROSA COUNTY TAX COLLECTOR
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 06 / 08 / 12 To 06 / 25 / 12 Report Type TR

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1167.32

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____ 0.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 0.00

(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) JILL B. SPORT

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) STAN COLIE NICHOLS

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name STAN COLIE NICHOLS

(2) I.D. Number _____

(3) Cover Period 06 / 08 / 12 through 06 / 25 / 12

(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					
06 / 25 / 12	STAN COLIE NICHOLS 5020 ROLAND RD PACE, FL. 32571	LOAN REPAYMENT	DIS		\$1,000.00
1					
06 / 25 / 12	SURFERS ON MISSION P. O. BOX 3040 PENSACOLA, FL. 32516	DISBURSEMENT OF UNSPENT FUNDS	DIS		\$167.32
2					
//					
//					
//					
//					
//					