

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

(1) Ann W. Bodenstein
Name

(2) 5552 Mulat Road
Address (number and street)

Milton, Fl. 32583

City, State, Zip Code

☐ **CHECK IF ADDRESS HAS CHANGED**

(3) **ID Number:** _____

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** Santa Rosa County Supervisor of Elections

☐ **Political Committee**

☐ **CHECK IF PC HAS DISBANDED**

☐ **Committee of Continuous Existence**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED**

(5) REPORT IDENTIFIERS

Cover Period: From 1 / 01 / 08 To 3 / 29 / 08 Report Type Q1

☒ **Original** ☐ **Amendment** ☐ **Special Election Report** ☐ **Independent Expenditure Report**

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary
Expenditures \$ 136.63

Transfers to Office
Account \$ 0.00

Total
Monetary \$ 136.63

(8) **Other Distributions**
\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 3,000.00

(10) TOTAL Monetary Expenditures To Date

\$ 643.81

(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) Ann W. Bodenstein

☐ Individual (only for electioneering commun.) ☒ **Treasurer** ☐ **Deputy Treasurer**

X Ann W. Bodenstein

Signature

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

(Type name) Ann W. Bodenstein

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

X Ann W. Bodenstein

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Ann W. Bodenstein (2) I.D. Number _____

(3) Cover Period 1 / 01 / 08 through 03 / 29 / 08 (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
/ /	NONE						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Ann W. Bodenstein (2) I.D. Number _____
 (3) Cover Period 1 / 01 / 08 through 03 / 29 / 08 (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
1 / 17 / 08	Supervisor of Elections 6495 Caroline St. Suite "F" Milton, Fl. 32570	petition verification	check		\$6.40
(1) #1012					
2 / 08 / 08	Supervisor of Elections 6495 Caroline St. Suite "F" Milton, Fl. 32570	petition verification	check		\$5.60
(2) #1013					
2 / 27 / 08	Milton Post Office Dogwood Drive Milton, Fl. 32570	postage stamps	check		\$99.00
(3) #1014					
3 / 11 / 08	Supervisor of Elections 6495 Caroline St. Suite "F" Milton, Fl. 32570	petition verification	check		\$8.40
(4) #1015					
3 / 12 / 08	Office Depot Hwy. 90 Pace, Florida 32571	envelopes	check		\$10.63
(5) #1016					
3 / 24 / 08	Supervisor of Elections 6495 Caroline St. Suite "F" Milton, Fl. 32570	petition verification	check		\$6.60
(6) #1017					
/ /					
/ /					