

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yvonne Harper

Name

(2) 7375 Olympia Street

Address (number and street)

Navarre, FL 32566

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY
2014 MAR 4 AD 10 11

(4) Check appropriate box(es):

Candidate Office Sought: District 4 County Commission

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 02 / 01 / 2014 To 02 / 28 / 2014 Report Type: M2

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 25 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , 45 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 125 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 10 . 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) Yvonne Harper

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

(Type name) Yvonne Harper

Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Yvonne Harper (2) I.D. Number _____

(3) Cover Period 02 / 01 / 2014 through 02 / 28 / 2014 (4) Page 1 of 1

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

(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					
02 / 06 / 14	Santa Rosa Elections Office	Candidate Petitions	CAN		\$10.00
01					
///					
///					
///					
///					
///					
///					
///					
///					