CAMPAIGN TREASURER'S REPORT SUMMAR (1) Yvonne Harper OTH JUN 24 PM 2 52 Name (2) 7375 Olympia Street Address (number and street) Navarre, FL 32566 City. State, Zip Code ID Number: (3) Check here if address has changed (4) Check appropriate box(es): Office Sought: SRC Commission, District 4 Candidate Political Committee (PC) Check here if PC or ECO has disbanded ☐ Electioneering Communications Org. (ECO) Check here if PTY has disbanded. Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed Independent Expenditure (IE) (also covers an individual making electioneering communications) (5) Report Identifiers *2*014 Report Type: P1 To 06 /20 12014 Cover Period: From 06 /01 Special Election Report ☐ Amendment Original (7) **Expenditures This Report** (6) Contributions This Report Monetary \_\_\_\_\_, , 14 . 70 Expenditures Cash & Checks Transfers to Loans Office Account **Total Monetary Total Monetary** In-Kind (8) Other Distributions **TOTAL Monetary Contributions To Date TOTAL Monetary Expenditures To Date** (9) (10)2,550 2,525 (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 (Type name) Yvonne Harper ☐ Individual (only for IE ☐ Treasurer Deputy Treasurer ☑ Candidate ☐ Chairperson (only for PC and PTY) or electioneering comm.) Signature

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS NS

Yvonne Harper

(1) Name

MILTON, FL 32570-4592

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)		(9)	(10)	(11)	(12)
Sequence Number		Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	
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SUPERVISOR OF ELECTIONS .. 6495 CAROLINE ST., STE. F

MILTON, FL 32570-4592

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(2016, 44 M 22 | PN 2 52 (1) Name Yvonne Harper (4) Page \_\_\_\_ (3) Cover Period 06 /<sup>2014</sup> through \_06 , 2014 ,20 (11) (9) (10) (8) (7) (5) Date Purpose **Full Name** (add office sought if (Last, Suffix, First, Middle) (6)Expenditure contribution to a Street Address & Sequence Туре **Amount** candidate) Amendment City, State, Zip Code Number U.S. Post Office Postage 1910 Navarre School Road /15 2014 Navarre, FL 32566 14.70 CAN 1