

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

(1) Cliff Webster  
**Name**  
 (2) PO Box 1077  
**Address (number and street)**  
Mims, FL 32754  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1017250]  
 Submitted on:  
 4/6/2010 16:32:00 (eastern)

**CHECK IF ADDRESS HAS CHANGED** (3) ID Number: 306

(4) **Check appropriate box(es):**  
 Candidate (office sought): Sheriff  
 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 1/1/2010 To 3/31/2010 / Report Type Q1  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 1,175.00  
 Loans \$ 0.00  
 Total Monetary \$ 1,175.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 0.00  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 0.00

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

**(9) TOTAL Monetary Contributions To Date**  
 \$ 2,756.72

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 315.50

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p><b>X</b> _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY &amp; electioneering commun. organization)</p> <p><b>X</b> _____</p> <p>Signature</p>
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** Cliff Webster **(2) I.D. Number** 306  
**(3) Cover Period** 1/1/2010 through 3/31/2010 **(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
(6) Sequence Number							
2/16/2010 / /	Brevard Impact Group, PO Box 157 Mims, fl 32754	B	n/a	CH	n/a		\$75.00
1							
2/16/2010 / /	Brevard Impacy Group, PO Box 157 Mims, Fl 32754	B	n/a	CH	n/a		\$50.00
2							
2/16/2010 / /	Grant, Dora 7211 Lakewood Dr. Apt# 105 Austin, Tx 78750	I	retired	CH	n/a		\$50.00
3							
3/12/2010 / /	Culbreth Enterprises, 4650 Nicole Ave. Cocoa, Fl 32927	B	bail bondsman	CH	n/a		\$500.00
4							
3/12/2010 / /	Smitty's Bail Bonds, PO Box 1371 Sharpes, Fl 32959	B	bail bondsman	CH	n/a		\$500.00
5							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Cliff Webster

(2) I.D. Number 306

(3) Cover Period 1/1/2010 through 3/31/2010

(4) Page 1 of 0

(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					
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