CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Sandra McMurray Jackson	OFFICE USE ONLY						
(- /	Name	ONLINE SUBMISSION						
(2)	104 Howard Street	[1066052] Submitted on:						
	Address (number and street)	6/26/2014 16:07:41 (eastern)						
	Century, FL 32535	(0/20/2011 10:0/:11 (castelli)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 480						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: Century Town	Council, Seat 5						
	Political Committee (PC)	¬ o						
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cove	er Period: From $6 / 1 / 2014$ To							
		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash	n & Checks \$, , , 000	Monetary						
Loar	s \$,, <u>50</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$, , , 50 . 00	Total Monetary \$, , 50 . 00						
In-Ki	nd \$, , 0.00							
		(8) Other Distributions						
		\$, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, , 50 . 00	\$, ,, 50 . 00						
	(11) Cert							
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:								
(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		×						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sandra McMurray Jac	kson			2) I.D. Numbe	er4	80
	6/1/2014		9	/18/2014			
(3) Cover Peri	od//	thro	ough	<i>I I</i>	(4) Pag	je	of
	×1	T		Y .		T :	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
6/18/2014	MCMURRAY-JACKSON, SANDRA	I		LO			\$50.0
1, 1	SANDRA 104 HOWARD STREET						
	CENTURY, FL 32535						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Sandra	McMurra	ıy ı	Jackson			 (2) I.D. Num	ber	4	180	av.
		6/1/201	4		9/18/	2014					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
6/18/2014	BOCC, P.O.BOX 1591 PENSACOLA, FL 32591	qualifying fee.	МО		\$15.00
1					
7/3/2014	MCMURRAY-JACKSON, SANDRA 104 HOWARD STREET CENTURY, FL 32535	repayment of loan	МО		\$35.00
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