

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

(1) Mary Kay Engelking
Name
(2) 107 Dinkla Lane
Address (number and street)
Palatka, FL 32177
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1043019]
Submitted on:
8/10/2012 16:00:00 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 152

(4) Check appropriate box(es):
 Candidate (office sought): Bd of County Comm Dist 5
 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 7/21/2012 To 8/9/2012 / / Report Type F3
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00
 Loans \$ 1,000.00
 Total Monetary \$ 1,000.00
 In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 842.40
 Transfers to Office Account \$ 0.00
 Total Monetary \$ 842.40

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 4,175.00

(10) TOTAL Monetary Expenditures To Date
 \$ 1,600.06

(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>X _____</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 & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Mary Kay Engelking (2) I.D. Number 152

7/21/2012 through 8/9/2012

(3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
7/30/2012 / /	Engelking, Mary PO Box 363 Palatka, Fl 32177	I	self employed	LO			\$500.00
1							
8/5/2012 / /	Engelking, Mary PO Box 363 Palatka, Fl 32177	I	self employed	LO			\$500.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Mary Kay Engelking

(2) I.D. Number 152

(3) Cover Period 7/21/2012 through 8/9/2012

(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
(6) Sequence Number					
8/8/2012 //	Lakes Street Publishing, 330 North Summit St Crescent City, Fl 32112	ad	MO		\$142.40
1					
8/8/2012 //	Staples, Palatka, FL 32177	cards	MO		\$300.00
2					
8/8/2012 //	US Post Office, Palatka, FL 32177	stamps	MO		\$400.00
3					
//					
//					
//					
//					