

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

(1) Michael A. Adkinson, Jr.

Name

(2) Protected Address

Address (number and street)

Protected,

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY
ONLINE SUBMISSION
[1012770]

(3) ID Number: 83

(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

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 8/2/2008 To 8/21/2008 / Report Type F3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 270.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 270.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 91,295.00

(10) TOTAL Monetary Expenditures To Date

\$ 89,837.69

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

(Type name)

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X

X

Signature

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael A. Adkinson, Jr. (2) I.D. Number 83

8/2/2008 8/21/2008

(3) Cover Period / / through / / (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael A. Adkinson, Jr.

(2) I.D. Number 83

(3) Cover Period 8/2/2008 through 8/21/2008

(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					
8/13/2008 //	Seabreeze Radio Station, Hwy 393 Santa Rosa Beach, Fl 32459	advertising	MO	Delete	\$356.00
1					
8/13/2008 //	Seabreeze Radio Station, Hwy 393 Santa Rosa Beach, Fl 32459	advertising	MO	Add	\$576.00
2					
8/15/2008 //	TV 24, Hwy 90 Defuniak Springs, Fl 32433	advertising	MO	Delete	\$300.00
3					
8/15/2008 //	TV 24, Hwy 90 Defuniak Springs, Fl 32433	advertising	MO	Add	\$350.00
4					
//					
//					
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