

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

(1) Citizens for a Safe Brevard
Name
 (2) P.O. Box 1932
Address (number and street)
Melbourne, Fl 32902
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1046669]
 Submitted on:
 10/5/2012 16:40:09 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 461

(4) **Check appropriate box(es):**
 Candidate (office sought): _____
 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 9/15/2012 To 9/28/2012 / Report Type G2
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 675.15
 Loans \$ 0.00
 Total Monetary \$ 675.15
 In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,207.52
 Transfers to Office Account \$ 0.00
 Total Monetary \$ 1,207.52

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 13,375.15

(10) TOTAL Monetary Expenditures To Date
 \$ 13,365.15

(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 Citizens for a Safe Brevard (2) I.D. Number 461

9/15/2012 through 9/28/2012

(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 Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
9/24/2012 / /	Bighthouse, 720 Magnolia Melbourne, FL 32935	B	cable tv provider.	CH			\$675.15
1							
/ /							
/ /							
/ /							
/ /							
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/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Citizens for a Safe Brevard

(2) I.D. Number 461

9/15/2012 through 9/28/2012

(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) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
9/24/2012 / /	David Waters, 546 Shady Lane Melbourne, FL 32935	payment for ad design	MO		\$675.15
1					
9/24/2012 / /	Adam Bird / GrayRobinson, PA, 1795 W. Nasa Blvd. Melbourne, FL 32901	legal consultation.	MO		\$532.37
2					
/ /					
/ /					
/ /					
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