

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David W. Armstrong
 Name
 (2) 5615 Willoughby Drive
 Address (number and street)
Melbourne, FL 32934
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1079775]
 Submitted on:
 10/22/2014 10:37:56 (eastern)

Check here if address has changed

(3) ID Number: 475

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner, District 4
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 22 / 2014 To 11 / 17 / 2014 Report Type: TR-P

Original Amendment Special Election 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 \$, , 606 . 13

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 606 . 13

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 41 , 981 . 58

(10) TOTAL Monetary Expenditures To Date

\$, 41 , 981 . 58

(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:

(Type name) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name David W. Armstrong (2) I.D. Number 475

8/22/2014 through 11/17/2014

(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 David W. Armstrong

(2) I.D. Number 475

(3) Cover Period 8/22/2014 through 11/17/2014

(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					
10/20/2014 / /	Armstrong, David W 5615 Willoughby Drive Melbourne, FL 32934	partial loan repayment to close account	RM	Delete	\$2,564.97
1					
10/20/2014 / /	Armstrong, David W 5615 Willoughby Drive Melbourne, FL 32934	partial loan repayment	RM	Add	\$3,171.10
2					
/ /					
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