	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Jerry Allender	OFFICE USE ONLY						
•	Name	ONLINE SUBMISSION						
(2)	719 Garden Street							
	Address (number and street)							
	Titusville, FL 32796	ONLINE SUBMISSION   (1061115)   Submitted on:   4/3/2014 08:38:11 (eastern)   (eastern)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 493						
(4)								
		t Authority, District 1						
	☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐	Check here if PC or FCO has dishanded						
	Party Executive Committee (PTY)							
	☐ 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 3 / 1 / 2014 To	3 / 31 / 2014 Report Type: M3						
<mark></mark> O	original Amendment Spe	ecial Election Report						
(6)								
(0)	Contributions This Report	(7) Expenditures This Report Monetary						
Cash	h & Checks \$ , 1,200.00	utions This Report       (7)       Expenditures This Report         Monetary       Expenditures       ,						
•								
Loar	ns \$,, <u>0</u> .00							
		Office Account \$ , , 0 . 00						
Tota	l Monetary \$ ,1 , <u>200</u> . <u>00</u>							
		Total Monetary \$ , , <u>0</u> . <u>00</u>						
In-Ki	ind \$,,, <u>0</u> . <u>00</u>							
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>20</u> , <u>551</u> . <u>00</u>	\$ , , <u>85</u> . <u>03</u>						
	(11) Cert It is a first degree misdemeanor for any perso							
١٥	-							
10	certify that I have examined this report and it is true, corre	ect, and complete:						
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	gnature	Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name				493					
3/1/2014				3/31/	2014				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
3/7/2014 /	Murray, John S 4000 S Atlantic Ave New Smyrna Beach, FL 32169	Î	retired	СН			\$500.0
3/9/2014	Lee, Rhonda A 400 Harbor Dr Cape Canaveral, FL 32920	I	businessperson	≥ CH			\$500.0
3/24/2014	Rusty's, 628 Glen Cheek Dr Cape Canaveral, FL 32920	В	restaurant	СН			\$200.0
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Name Jerry	Allender	(3	D EXPENDITURES (2) I.D. Number 493			
Cover Period _	3/1/2014 3/ 		4) Page <u>1</u>	of	0	
(5) Date (6) Sequence Number	(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)	(11)	
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