

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

(1) Andy Ziegler

Name

(2) 4045 Powell Rd

Address (number and street)

West Melbourne, FL 32904

City, State, Zip Code

☐ **CHECK IF ADDRESS HAS CHANGED**

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** School Board, District 5

☐ **Political Committee**

☐ **Committee of Continuous Existence**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF PC HAS DISBANDED**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED**

OFFICE USE ONLY

ONLINE SUBMISSION

[1057526]

Submitted on:

12/9/2013 22:19:31 (eastern)

(3) **ID Number:** 505

(5) REPORT IDENTIFIERS

Cover Period: From 11/1/2013 To 11/30/2013 Report Type M11

☒ **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 \$ 37.13

Transfers to Office
Account \$ 0.00

Total
Monetary \$ 37.13

(8) **Other Distributions**
\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,000.00

(10) TOTAL Monetary Expenditures To Date

\$ 37.13

(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 electioneering commun.)** ☐ **Treasurer** ☐ **Deputy Treasurer**

X

Signature

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

(Type name)

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

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Andy Ziegler (2) I.D. Number 505

11/1/2013

11/30/2013

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

[illegible]

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Andy Ziegler

(2) I.D. Number 505

(3) Cover Period 11/1/2013 through 11/30/2013

(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
11/1/2013 / /	PNC Bank, 6511 Lake Andrew Dr, Viera, FL 32940	checks	MO		\$37.13
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