

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Denise Coyle  
 Name

(2) 1898 Delaware St. NW  
 Address (number and street)

Palm Bay, FL 32907  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1058208]

Submitted on:  
 1/9/2014 02:27:09 (eastern)

Check here if address has changed (3) ID Number: 506

(4) Check appropriate box(es):

Candidate Office Sought: School Board, District 5

Political Committee (PC)  Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO)  Check here if PTY has disbanded

Party Executive Committee (PTY)  Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

### (5) Report Identifiers

Cover Period: From 12 / 1 / 2013 To 12 / 31 / 2013 Report Type: M12

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,      , 0 . 00

Loans \$      ,      , 100 . 00

Total Monetary \$      ,      , 100 . 00

In-Kind \$      ,      , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      , 22 . 70

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 22 . 70

**(8) Other Distributions**  
 \$      ,      , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,      , 125 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,      , 22 . 70

### (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 Denise Coyle (2) I.D. Number 506

12/1/2013 through 12/31/2013

(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 Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
12/30/2013 / /	coyle, denise 1898 DELAWARE ST palm bay, Fl 32909	I	business owner	LO			\$100.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Denise Coyle

(2) I.D. Number 506

(3) Cover Period 12/1/2013 through 12/31/2013

(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
(6) Sequence Number					
12/30/2013 / / 1	Brevard Supervisor Elections , 450 Cogan Dr. SE Palm Bay, Fl 32907	petition count	MO		\$22.70
/ /					
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