CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Denise Coyle	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	1898 Delaware St. NW	Submitted on:							
	Address (number and street) Palm Bay, FL 32907	11/14/2014 10:04:10 (eastern)							
	City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 506							
(4)	Check appropriate box(es):	(6) 12 1141116611							
(-7	 ☑ Candidate Office Sought: School Board, District 5 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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	dentifiers							
	er Period: From 7 / 5 / 2014 To	7 / 18 / 2014 Report Type: <u>P3</u>							
0	riginal Amendment Sp	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , 000	Total Monetary \$. 5 . 19							
In-Ki	ind \$,, <u>0</u> . <u>00</u>	Total Monetary \$, , 5 . 19							
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T)	(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 Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)								
X	gnature	X Signature							
2	unature	ı əlunature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Denise Coyle				2) I.D. Numbe	r5	06
	7/5/2014			/18/2014			
(3) Cover Perio	od / /	thro	ough	<i>II</i>	(4) Page	<u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Denise Coyle					(2)	(2) I.D. Number			506		
		7/5/20	14		7/18/20	014			-			
(3) Cover Pe	eriod	I	1	through	1	1	(4)	Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
7/14/2014	Pay Pal, 2211 North First Street San Jose, ca 95131	processing fee	MO	Add	\$5.19
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