CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) John Craig	OFFICE USE ONLY					
Name	ONLINE SUBMISSION [1060460]					
(2) 2090 Eastwood Dr Address (number and street)	Submitted on:					
Merritt Island, FL 32952	3/10/2014 09:35:43 (eastern)					
City, State, Zip Code						
Check here if address has changed	(3) ID Number: 507					
(4) Check appropriate box(es):						
Candidate Office Sought: School Board,	District 2					
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 <u>10</u> / <u>1</u> / <u>2013</u> To	<u>10</u> / <u>31</u> / <u>2013</u> Report Type: <u>M10</u>					
Original Amendment Sp	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
(Monetary					
Cash & Checks \$, , <u>-10</u> 0. <u>00</u>	Expenditures \$,,,					
Loans \$,,0.00	Transfers to					
	Office Account \$,,,0.00					
Total Monetary \$,,00						
A	Total Monetary \$, , , 00					
In-Kind \$,, <u>0</u> . <u>00</u>						
	(8) Other Distributions \$,,000_					
	· · · · · · · · · · · · · · · · · · ·					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$, <u>1</u> , <u>500</u> . <u>00</u>	\$,, 00_					
(11) Cer	l tification					
(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)	(Type name)					
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)					
X	X					
Signature	Signature					

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	John Craig		(2) I.D. Number						
10/1/2013			1	0/31/2013			_		
(3) Cover Per	riod / /	thre	ough	11	(4) Pa	ge _1	_ of _1		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount		
10/30/2013 / /	Craig, Carol 2090 Eastwood Drive Merritt Island , FL 32952	I	computer engineer	Сн		Delete	\$100.00		
1									
1 1									
/ /	_								
1 1	_	2							
1 1									
1 1	_								
1 1	_								
1 1	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name John Craig (2) I.D. Number 507							
(3) Cover Period	10/1/2013through	10/31/2013 //	(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) Amendment	(11) Amount		
_/ /							
_/ /							
_/ /							
_/ /							
/							
_/ /							
_/ /							

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES