

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Paul Anderson  
 Name

(2) PO Box 353041  
 Address (number and street)  
Palm Coast, Fl 32135  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1168846]

Submitted on:  
 8/21/2018 12:41:51 (eastern)

Check here if address has changed (3) ID Number: 404

(4) Check appropriate box(es):

Candidate Office Sought: School Board District 4

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 / 2017 To 12 / 31 / 2017 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 \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

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

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 2 , 960 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 2 , 569 . 76

### (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 Paul Anderson (2) I.D. Number 404  
 (3) Cover Period 12/1/2017 through 12/31/2017 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
12/1/2017 / /	Anderson, Paul 41 Lancaster Ln Palm Coast, FL 32137	S		LO		Add	\$100.00
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Paul Anderson

(2) I.D. Number 404

(3) Cover Period 12/1/2017 through 12/31/2017

(4) Page 1 of 0

(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					
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