CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Nate McLaughlin	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	121 Pine Lakes Pkwy N Apt 209	Submitted on:								
	Address (number and street)	11/8/2014 08:19:49 (eastern)								
	Palm Coast, FL 32137 City, State, Zip Code	— I								
	☐ Check here if address has changed	(3) ID Number: 271								
(4)	_	(3) ID Number: 271								
(4)	Check appropriate box(es): Candidate Office Sought: County Commission District 4 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)									
(5) Report Identifiers										
Cover Period: From 5 / 1 / 2014 To 5 / 31 / 2014 Report Type: M5										
	riginal 🖺 Amendment 🗌 Spe	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 \$, , 0 . 00								
In-Ki	ind \$,,,000									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date \$,17 , _91500	(10) TOTAL Monetary Expenditures To Date \$,16_ ,96339_								
(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 Deputy Treasurer										
_X		<u>X</u>								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Nate McLaughlin		(2) I.D. Number				
	5/1/2014		5	/31/2014			
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e	of
		ľ		r			
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	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 Nate McLaughlin (2) I.D. Number 271								
	5/1/2014 /through_	5/31/2014 //	(4) Page1	44	0			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sough: contribution to a candidate)	t if Expenditure Type	(10)	(11) Amount			
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