	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Michael McElroy	OFFICE USE ONLY					
7 1	Name	ONLINE SUBMISSION					
(2)	839 Westlake Dr	Submitted on:					
	Address (number and street)	4/7/2014 10:45:25 (eastern)					
	Ormond Beach, FL 32174						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:276					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: School Board	District 4					
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded					
		☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cove	, , ,						
	er Period: From $\frac{3}{2}$ / $\frac{1}{2014}$ To						
<u>N</u> ∪	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Casl	h & Checks \$, , 000	Expenditures \$, , <u>297</u> . <u>51</u>					
¥	\$ 1 000 00	<u></u>					
Loar	ns \$,1,00000	Transfers to Office Account \$					
Toto	Il Monetary \$, 1,000.00	Office Account \$, , , 0 . 00					
TOta	Il Monetary \$,1 ,00000	Total Monetary \$. 297 . 51					
In Ki	:J \$ 0 00	Total Monetary \$, , 297 . 51					
In-Ki	ind \$,,,000	(8) Other Distributions					
		(8) Other Distributions \$, , 000_					
		,, <u></u> ,,					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$	\$, , <u>532</u> . <u>91</u>					
		12-2-12					
	(11) Cert It is a first degree misdemeanor for any perso						
١٠		` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					
I certify that I have examined this report and it is true, correct, and complete:							
	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		x					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Michael McElroy			(2) I.D. Number 276					
	3/1/2014		3	/31/2014					
(3) Cover Perio	od/	thro	ough	11	(4) Page	1	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)		
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	Americat		
Number	City, State, Zip Code McElroy, Michael		Occupation police	Type LO	Description	Amendment	Amount \$1,000.0		
3/27/2014	839 Westlake Drive Ormond Beach, FL 32174		retired				, , , , , , ,		
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I I									
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J I									
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1 1									
DS-DE 13 (Rev. 11/1	3)	SEE RE	EVERSE FOR	INSTRUCTIONS	AND CODE VALU	JES			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Michael	McElr	oy				 (2) I.D. Nur	nber	2	276	
	3	3/1/20	14		3/31/20	14					
(3) Cover P	eriod	1	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
3/27/2014	Direct Designs, 10500 Chester Way Woodstock, MD 21163	for pens via amex	MO		\$268.41
3/26/2014	Flagler SOE, J 1769 East Moody Blvd Bunnell, FL 32110	petition verification	МО		\$19.30
3/31/2014	Flagler SOE, 1769 East Moody Blvd Bunnell, FL 32110	petition verification	МО		\$9.80
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