	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Toni Baker	OFFICE USE ONLY					
•	Name	ONLINE SUBMISSION					
(2)	50 Foster Lane	Submitted on:					
	Address (number and street)	Submitted on: 5/12/2014 14:14:08 (eastern)					
	Palm Coast, FL 32137						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: School Board	District 2					
	Political Committee (PC)	□ 01 - d. b '/ 20 500 b disbouded					
		☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded					
		☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Para et	1.1					
~	• • • •	dentifiers					
Cove	er Period: From $\frac{4}{2}$ / $\frac{1}{2}$ / $\frac{2014}{201}$ To	4 / 30 / 2014 Report Type: M4					
X O	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Cash	h & Checks \$ , , 000	Expenditures \$ , , 0 . 00					
1	<b>\$</b> 1 350 00	T					
Loar	ns \$, <u>1</u> , <u>350</u> . <u>00</u>	Transfers to Office Account \$					
Tota	Il Monetary \$ , 1 , 350 . 00	Office Account \$ , , , 0 . 00					
Tota	Il Monetary \$,1 , <u>350</u> . <u>00</u>	Total Monetary \$ . 0 . 00					
U 1Z:	• • 0 00	Total Monetary \$ , , , 0 . 00					
In-Ki	ind \$,,,000						
		(8) Other Distributions					
		\$ , , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, <u>1</u> , <u>350</u> . <u>00</u>	\$ , , <u>0</u> . <u>00</u>					
	(11) Cert						
	It is a first degree misdemeanor for any person	• • • • • • •					
I certify that I have examined this report and it is true, correct, and complete:							
(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
or	electioneering comm.)						
Х		×					
	gnature	Signature					

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Toni Baker	(2) I.D. Number				
	4/1/2014		1/30/2014			
(3) Cover Perio	od / /	through	11_	(4) Pag	ge <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	Contributor Type Occupation		In-kind Description	Amendment	Amount
4/30/2014	Baker, Toni 50 Foster Lane Palm Coast, FL 32137	S self-employed work from		24		\$1,300.
1						
4/1/2014	Baker, Toni 50 Foster Lane Palm Coast, FL 32137	S work at home	LO			\$50.
2						
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1 1						
j j						
1 1						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES  (1) Name Toni Baker (2) I.D. Number 282									
(3) Cover Period	4/1/2014 /through_	4/30/2014	(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)	(11) Amount				
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