	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Rick Staly	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1125784]								
(2)	PO Box 883	Submitted on:								
	Address (number and street)	9/9/2016 10:42:08 (eastern)								
	Flagler Beach, Fl 32136 City, State, Zip Code									
	_	(2) ID New Low								
	Check here if address has changed	(3) ID Number: 320								
(4)	Check appropriate box(es):									
 ☐ Candidate Office Sought: Sheriff ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 										
	(5) Report	Identifiers								
Cov	er Period: From 8 / 26 / 2016 To	9 / 2 / 2016 Report Type: G1								
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	h & Checks \$,4 , 625 . 00	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$,4 , 625 . 00	Total Manatany C 53 13								
In-Ki	ind \$, , 849 . 80	Total Monetary \$, , , 3 . 13								
III-K	Ψ, , <u>στο</u> . <u>στο</u>	(8) Other Distributions								
		\$, , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$, _124 , _51240								
<u>(</u> T	It is a first degree misdemeanor for any perscertify that I have examined this report and it is true, corrype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
<u>X</u>		_X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	ick Stalv				(2) I.D. Number _		320	
	8/26/20	16		9/2/2	016				
(3) Cover Period	1 /	1	through	1	1	(4) Page	1	of	2

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6) Saguanas	(Last, Suffix, First, Middle) Street Address &	_	ontributor	Cantribution	المادامما		
Sequence Number		888	5.200.000 (16.7.400.000 (16.9.00))	Contribution	In-kind Description	Amendment	Amount
Number	City, State, Zip Code Strobridge, Mark D		Occupation retired	Type CH	Description	Amendment	\$500.00
8/31/2016	Protected Chuluota, FL 32766		leo	CII			\$300.00
1							
8/31/2016 / /	Strobridge, Beatrice O Protected Chuluota, FL 32766	I	retired	СН			\$500.00
2							
9/2/2016	Bisland, Cynthia Protected Ormond Beach, FL 32174	I	paralegal	СН			\$1,000.00
3							
9/2/2016	Bisland, John Protected Ormond Beach, FL 32174	I	leo	СН			\$1,000.00
4							
8/31/2016 / /	Premier Home Realty, 52 Tuscan Way Suite 202-352 St. Augustine, FL 32092	В	realtor	СН			\$1,000.00
8/31/2016 / /	Extrom, John 2 Weldon Way Palm Coast, FL 32137	I	retired	СН			\$500.00
6							
8/30/2016 / /	Kuleski Jr, Harry Protected Palm Coast, FL 32137	I	retired leo	СН			\$25.00
7							
8/31/2016 / /	Salan-Stoughton, Janet 1 Hammock Beach Pkwy Palm Coast, FL 32137	I	realtor	СН			\$100.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Rick Staly				(;	2) I.D. Number _		320	
	8/26/20	16		9/2/20	16				
(3) Cover Perio	'A /	1	through	1	1	(4) Page	2	of	2

	_		(4)		1	T I	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
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(6)	(Last, Suffix, First, Middle)	_	1.11	0 1 11 11			
Sequence	Street Address &	0.000	ontributor	Contribution	In-kind	Amendment	8
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
8/31/2016 /	Staly, Rick Protected Palm Coast, FL 32137	S	leo	IK	po box rental		\$30.00
9							
8/31/2016 / /	Staly, Rick Protected Palm Coast, FL 32137	S	leo	IK	victory party food		\$748.88
10							
8/31/2016	Staly, Rick Protected Palm Coast, FL 32137	S	leo	IK	volunteer meals		\$38.69
11							
9/1/2016	Staly, Rick Protected Palm Coast, FL 32137	S	leo	IK	office supplies		\$5.89
12							
9/2/2016	Staly, Rick Protected Palm Coast, FL 32137	S	leo	IK	domain renewal		\$26.34
13							
1 1							
1 1							
1 1							>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Rick	Staly						(2) I.D. Nun	nber	320		
	8/26/2	016		9/2/201	6						
(3) Cover Period	1	1	through	1	1		(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
9/2/2016	Transaxt, 190 Monroe Avenue NW	credit card fees	MO		\$73.13
1	Suite 500 Grand Rapids, MI 49503				
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11					
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