	CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Sandy Quinn	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	116 Royal St	Submitted on:							
	Address (number and street)	11/4/2018 22:14:48 (eastern)							
	Port St. Joe, FL 32456 City, State, Zip Code								
	_	(2) 17 11							
	Check here if address has changed	(3) ID Number: 274							
(4) Check appropriate box(es):									
	☐ Candidate Office Sought: County Commis	sion Dist 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	Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove	er Period: From 10 / 20 / 2018 To	11 / 1 / 2018 Report Type: G7							
⊠ o		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Contributions Time Report	Monetary							
Cast	h & Checks \$, , 550 . 00	Expenditures \$, , 0 . 00							
Ouoi	, <u> </u>								
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to							
		Office Account \$, , 0 . 00							
Tota	I Monetary \$, , <u>550</u> . <u>00</u>								
		Total Monetary \$, , 0 . 00							
In-Ki	ind \$,, <u>0</u> . <u>00</u>								
		(8) Other Distributions							
		\$, , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
. ,	\$, 3, 352 . 30	\$, 1 , 974 . 14							
		tification on 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:									
_(T	ype name)	_(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		×							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sandy Quinn (2) I.D. Number 274						274
	10/20/2018			1/1/2018		1	1
(3) Cover Perio	od / /	thro	ough	<i>ll</i>	(4) Page	9	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address &		ontributor	Contribution	In-kind	Amendment	A
Number	City, State, Zip Code Democratic		Occupation democration	Type CH	Description	Amendment	Amount \$550.0
10/20/2018	Executive		committee				
1	Committee, 116A Sailors Cove DR Port St. Joe, FL 32456						
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES	

	CAMPAIGN TREASURER'S REPORT - ITEMI e Sandy Quinn				ITURES er	RES 274	
(3) Cover Period	10/20/2018 1 / /	through	L/2018 //	(4) Page	of	0	
(5) Date	(7) Full N	ame	(8) Purpose	(9)	(10)	(11)	

(6) 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
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