CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Laura Moss	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	275 Date Palm Road 501	[1078578]								
	Address (number and street)	Submitted on:								
	Vero Beach, FL 32963	10/10/2014 14:22:19 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 277								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: Indian River County Hospital District - Seat 2 ☐ 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								
Cove	er Period: From 9 / 27 / 2014 To									
<u>X</u> 0	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casł	n & Checks \$,6 , <u>000</u> . <u>00</u>	Monetary Expenditures \$,5 , <u>172</u> . <u>56</u>								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$,6 , <u>000</u> . <u>00</u>	Total Monetary \$, 5 ,172 . 56								
In-Ki	nd \$, , 0 . 00									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>6</u> , <u>769</u> . <u>46</u>								
<u>(T</u>	(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 Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY)									
or	electioneering comm.)									
X		<u>X</u>								
Sig	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Laura Moss			(2) I.D. Numbe	er	277	
	9/27/2014			0/3/2014				
(3) Cover Perio	od///	thro			(4) Pag	je <u>1</u>	of	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11)	(12)	
9/29/2014	Moss, Laura 275 Date Palm Rd. #501 Vero Beach, FL 32963		candidate	СН	Description		\$6,000.0	
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Laura Moss					 (2) I.D. Nun	nber	277			
		9/27/	2014		10/3/2	014					
(3) Cover Pe	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
9/29/2014	Ironside, 1323 21st St. Vero Beach, FL 32960	printing of handouts	МО		\$169.57
1					
10/2/2014	Ironside, 1323 21st St. Vero Beach , FL 32960	postcard mailing	MO		\$5,002.99
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DC DE 44 (Day)					