	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Laura Matthes Moss	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1073404]								
(2)	275 Date Palm Road 501	Submitted on:								
	Address (number and street)	8/20/2014 15:16:07 (eastern)								
	Vero Beach, FL 32963									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 277								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: Indian River County Hospital District - Seat 2</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed individual making electioneering communications)</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From <u>8</u> / <u>9</u> / <u>2014</u> To	8 / 21 / 2014 Report Type: <u>P7</u>								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ ,1 , <u>000</u> . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$ ,1 ,00000	Total Monetary \$ , , 110 . 68								
In-Ki	and \$,, <u>0</u> .00	, , ,								
		(8) Other Distributions \$ , , 000_								
(9)	<b>TOTAL Monetary Contributions To Date</b> \$	(10) TOTAL Monetary Expenditures To Date \$ , ,11068								
(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    Deputy Treasurer										
<u>X</u>		X								
Si	gnature	Signature								

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Laura Matthes Moss			(2) I.D. Number 277						
	8/9/2014		8	/21/2014						
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	1	of			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)			
Sequence Number	Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount			
8/12/2014	Moss, Laura 275 Date Palm Rd. #501 Vero Beach, FL 32963		candidate	CH	Besonption		\$1,000.0			
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name <u> </u>	aura	Matth	es	Moss					 (2) I.D. Num	nber	2	277	an an
		8/9/	201	L4		8/21	/20	114					
(3) Cover Po	eriod	1		1	through	1	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
8/14/2014	The Studio, 921 Azalea Lane Vero Beach, FL 32963	campaign sash	МО		\$25.68
8/14/2014	List, CPA, Eddie 11015 65th Terrace N.	review of form 1	МО		\$85.00
2	Seminole, FL 33772				
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