	CAMPAIGN TREASURE	ER'S REPORT SUMMARY								
(1)	Bob Russell	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1067832]								
(2)	2062 Cortez Avenue	Submitted on:								
	Address (number and street)	7/11/2014 08:32:15 (eastern)								
	Vero Beach, FL 32960									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:								
(4)	Check appropriate box(es):									
		Mosquito Control District - Seat 2								
	Political Committee (PC)	Charle have if DC as ECO has dishanded								
		☐ Check here if PC or ECO has disbanded ☐ 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	t Identifiers								
Cov										
	er Period: From 6 / 21 / 2014 To									
X O	Original Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
		Monetary								
Cash	h & Checks \$, , <u>300</u> . <u>00</u>	Expenditures \$, , <u>100</u> . <u>00</u>								
	• 0.00									
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$								
- .	···· • • 300 00	Office Account \$, , , 0 . 00								
lota	Il Monetary \$, , <u>300</u> . <u>00</u>	Total Monetary \$. 100 . 00								
1 12:	· · • • 0 00	Total Monetary \$, , 100 . 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								
	\$,2, _20000	\$, , <u>578</u> . <u>56</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:										
_(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		x								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Bob Russell			(82		
	6/21/2014 od//		7	/4/2014			
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	5.600	(8)	(9)	(10)	(11)	(12)
Number 6/23/2014 // 1	City, State, Zip Code Forbes, Olske V. P. O. Box 2196 Vero Beach, FL 32960	Type	Occupation	Type CH	Description	Amenament	Amount \$100.00
6/25/2014	Fischer, Henry A. P. O. Box 780068 Sebastian, FL 32978	I	dentist	СН			\$200.00
1 1							
j I							
J I							
J J							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _Bo	ob i	Russe	11							 (2) I.D. Nur	nber	:	282	300
		6/2	21/20	014			7/4	1/201	4					
(3) Cover Per	riod	į	1	1	t	hrough		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
6/27/2014	Main Street Vero Beach, 14th Avenue	booth fee	MO		\$100.00
1	Vero Beach, FL 32960			-	
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