CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) IRC Education Association Political Ac							
Name (2) P.O. Box 2018	ONLINE SUBMISSION [1065590]						
(2) P.O. Box 2018 Address (number and street)	Submitted on:						
Vero Beach, FL 32961	6/24/2014 10:07:19 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 213						
(4) Check appropriate box(es):							
Candidate Office Sought:							
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 individual making electioneering communications)	Check here if no other IE or EC reports will be filed						
(5) Report Identifiers							
Cover Period: From <u>6</u> / <u>1</u> / <u>2014</u> To	6/ 20/ 2014 Report Type:						
Criginal Amendment Spo	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$ , , , 00	Expenditures \$,, <u>17</u> .00						
Loans \$,, 0.00	Transfers to						
	Office Account \$ , , 0 . 00						
Total Monetary \$,,,0 00							
	Total Monetary \$ , , <u>17</u> . <u>00</u>						
In-Kind \$,, <u>0</u> . <u>00</u>							
	(8) Other Distributions \$ 0.00						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>    5</u> , <u>  727</u> . <u>  00</u>	\$, <u>4</u> , <u>814</u> . <u>63</u>						
(11) Cor	L tification						
(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)	(Type name)						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	X						
Signature	Signature						

DS-DE 12 (Rev. 11/13)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name							
	6/1/2014		6	/20/2014		. 1	0
(3) Cover Perio	od/ /	thro	ough	<i>II</i>	(4) Page	e	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
/ /	-						
1 1							
/ /	-						
1 1							
1 1	-						
/ /							
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name IRC	<b>CAMPAIGN TREASURER'</b> Education Association Po	litical Action Com	ED EXPENDIT <sup>mi</sup> (2) የ.D. Number	URES	213
(3) Cover Period	6/1/2014 I/through_	6/20/2014 //	(4) Page <u>1</u>	of	1
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sough contribution to a candidate)		(10) Amendment	(11) Amount
6/2/2014 1	Bank of America, Vero Beach, FL 32960	account month maintenance f	ly MO		\$17.00
_/ /					
_/ /					
_/ /					

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES