

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Tod Mowery
Name
 (2) 241 SW Fernleaf Trail
Address (number and street)
Port St Lucie, FL 34953
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1058543]
 Submitted on:
 1/20/2014 10:32:58 (eastern)

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 230

(4) Check appropriate box(es):

- Candidate (office sought): County Commissioner, District 2
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee
 Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 12/1/2013 To 12/31/2013 Report Type M12
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>1,250.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>1,250.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 1,250.00

(10) TOTAL Monetary Expenditures To Date
 \$ 0.00

(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 electioneering commun.) Treasurer Deputy Treasurer
X _____
 Signature

I certify that I have examined this report and it is true, correct, and complete.
 (Type name) _____
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Tod Mowery (2) I.D. Number 230
 12/1/2013 through 12/31/2013
 (3) Cover Period / / through / / (4) Page 1 of 2

(5) Date	(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) Amendment	(12) Amount
12/27/2013 / /	Mundt, Craig 5051 N Highway 1A Apt. 12-1 Fort Pierce, FL 34949	I	retired	CH		Add	\$50.00
1							
12/27/2013 / /	Court, Jennifer 2482 SW Vardon St Port St. Lucie, FL 34953	I	social worker	CH		Add	\$100.00
2							
12/27/2013 / /	Inglis, Steve 116 Sandpiper Cir Jupiter, FL 33477	I	business owner	CH		Add	\$250.00
3							
12/18/2013 / /	Caraballo, Benjamin 920 SE Brookedge Ave. Port St. Lucie, FL 34983	I	business owner	CH		Add	\$25.00
4							
12/18/2013 / /	Theisen, Jeremy 1402 Lawnwood Circle 15 A Fort Pierce, FL 34950	I	consultant	CH		Add	\$50.00
5							
12/18/2013 / /	Russell, Dennis 555 SW Sanctuary Dr. Port St. Lucie, FL 34966	I	retired	CH		Add	\$50.00
6							
12/31/2013 / /	James, Annette 6009 NW Winfield Dr Port St. Lucie, FL 34986	I	consultant	CH		Add	\$100.00
7							
12/31/2013 / /	Loeb, Michael 5940 NW Center St Port St. Lucie, FL 34986	I	finance	CH		Add	\$25.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Tod Mowery **(2) I.D. Number** 230
 12/1/2013 through 12/31/2013
(3) Cover Period / / through / / **(4) Page** 2 of 2

(5) Date	(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) Amendment	(12) Amount
(6) Sequence Number							
12/31/2013 / /	Pinney, Stephen 1263 SW Cedar Cove Port St. Lucie, FL 34986	I	retired	CH		Add	\$200.00
9							
12/31/2013 / /	Village Green Tire & Auto, D 1439 Village Green Dr. Port St. Lucie, FL 34952	B	auto repair	CH		Add	\$100.00
10							
12/31/2013 / /	Mulleady, Cindy 1826 SW Renfro St, Port St. Lucie, FL 34953	B	business owner	CH		Add	\$100.00
11							
12/31/2013 / /	Hofstee, Michael 207 NW St. James Drive Port St. Lucie, FL 34983	B	chiropract or	CH		Add	\$100.00
12							
12/5/2013 / /	Mowery, Tod 241 SW Fernleaf Trail Port St. Lucie, FL 34953	S	candidate	CH		Add	\$100.00
13							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Tod Mowery

(2) I.D. Number 230

(3) Cover Period 12/1/2013 through 12/31/2013

(4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
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