CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Jerry Moore	OFFICE USE ONLY						
•	Name	ONLINE SUBMISSION						
(2)	P.O. Box 457	Submitted on:						
	Address (number and street)	3/4/2014 13:34:02 (eastern)						
	Panacea, FL 32346	3, 1, 2022 20 22 32 (22.222)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:15						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: County Commission	sioner District 4						
	☐ 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	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	dentifiers						
Cove	er Period: From 2 / 1 / 2014 To							
		ecial Election Report						
	Contributions This Report	T						
(0)	Contributions This Report							
Cach	n & Checks \$, , 0 . 01	Monetary Expenditures \$, , 36 . 65						
Casi	1 & Clieurs , , ,							
Loar	ns \$, , 0.00	Transfers to						
		Office Account \$, , 0 . 00						
Tota	I Monetary \$,,0 . 01							
		Total Monetary \$, , 36 . 65						
In-Ki	nd \$,,, <u>0</u> . <u>00</u>							
		(8) Other Distributions						
		\$,,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,2, _00001	\$, , <u>36</u> . <u>65</u>						
	(11) Cert It is a first degree misdemeanor for any perso							
Lo		• • • • • • • • •						
I certify that I have examined this report and it is true, correct, and complete:								
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jerry Moore				2) I.D. Numbe	er <u>1</u>	.5
2/1/2014				/28/2014			
(3) Cover Perio	od / /	thro	ough	11	(4) Pag	e ¹	of ¹
VII.050 998			1000				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
2/7/2014	Centennial Bank, 2932 Crawfordville Hwy	В		IN			\$0.0
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1 1	-						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name <u>J</u>	Jerry Moore					(2)	(2) I.D. Number			15		
		2/1/20	014		2/28/2	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
2/19/2014	Centennial Bank, 2932 Crawfordville Hwy Crawfordville, FL 32327	check order	MO		\$36.65
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DS-DE 14 (Rev					