CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Jo Ann Daniels	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	358 Wakulla Arran Rd	Submitted on:							
	Address (number and street)	8/1/2014 09:03:12 (eastern)							
	Crawfordville, FL 32327 City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 22							
(4)	_	(3) 1D Number							
(4)	Check appropriate box(es): Candidate Office Sought: School Board District 5 Political Committee (PC) 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									
Cove	er Period: From 7 / 19 / 2014 To	7 / 25 / 2014 Report Type:P4							
X o	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , , 00	Monetary							
Loans \$,,,000		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$,,	Total Monetary \$, 0 . 00							
In-Ki	and \$,, <u>0</u> .00	Total Monetary \$, , , 0 . 00							
		(8) Other Distributions \$, , 000							
(9)	TOTAL Monetary Contributions To Date \$, 6 , _40325_	(10) TOTAL Monetary Expenditures To Date \$, 5 , _ 196 96							
(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									
X		X Circumstance							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number									
7/19/2014 7/25/2014 (3) Cover Period / / through / / (4) Page1 of									
(5) Date (6) Sequence Number	(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)	(12) Amount			
7/22/2014	Gaylor, Kathleen 665 River Plantation Rd Crawfordville, FL 32327	I Constant	СН	Bescription		\$20.0			
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name Jo Ann Daniels (2) I.D. Number 22										
	7/19/2014 7/2 /through	5/2014	4) Page1		0					
(5) Date (6) Sequence Number	(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)	(11) Amount					
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