

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Donna Savary
 Name

(2) 31 Sarah Ct.
 Address (number and street)
Crawfordville, FL 32327
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1066215]

Submitted on:
 6/27/2014 09:36:07 (eastern)

Check here if address has changed (3) ID Number: 24

(4) Check appropriate box(es):

Candidate Office Sought: School Board District 5

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 6 / 1 / 2014 To 6 / 20 / 2014 Report Type: P1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 100 . 00

Loans \$, 1 , 500 . 00

Total Monetary \$, 1 , 600 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 128 . 11

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 128 . 11

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 2 , 300 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 364 . 38

(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 or electioneering comm.) Treasurer Deputy Treasurer

X _____

Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Donna Savary (2) I.D. Number 24

6/1/2014 through 6/20/2014

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 1

(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		Type	Occupation	Type	Description	Amendment	Amount
6/19/2014 / /	Nichols, Polly P.O. Box 1837 Crawfordville, FL 32326	I		CH			\$100.00
1							
6/19/2014 / /	Savary, Donna 31 Sarah Court Crawfordville, FL 32327	S	candidate, teacher	LO			\$1,500.00
2							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Donna Savary

(2) I.D. Number 24

(3) Cover Period 6/1/2014 through 6/20/2014

(4) Page 1 of 1

(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
6/18/2014 / /	Staples, 2345 Apalachee Parkway Tallahassee, FL 32301	envelopes	MO		\$24.71
1					
6/19/2014 / /	City of Sopchoppy, P.o. Box 1219 Sopchoppy, FL 32358	booth rental at 4th of july event	MO		\$25.00
2					
6/19/2014 / /	USPS, 606 Wakulla Aaran Road Crawfordville, FL 32326	postage for mailing	MO		\$78.40
3					
/ /					
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