CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Bill Anderson	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1080079]							
(2)	2481 Surf Rd	Submitted on:							
	Address (number and street) Crawfordville, FL 32327	10/24/2014 12:58:05 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 29							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: County Commissioner District 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>								
	(5) Report	Identifiers							
Cove	er Period: From 10 / 11 / 2014 To	10 / 17 / 2014 Report Type: G6							
X o	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , ,000	Monetary							
Loans \$,2, _00000		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , 2 , _00000	Total Monetary \$ , 125 . 65							
In-Ki	ind \$ , , 0.00	Total Monetary \$ , , 125 . 65							
		(8) Other Distributions \$ , , 000							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T	(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							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Bill Anderson (2) I.D. Number 29								
	10/11/2014 od///		1	0/17/2014	(4) Pag	je <u>1</u>	of	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contrik	outor	(9)	(10) In-kind	(11)	(12)	
Number	City, State, Zip Code Anderson, William	Type Oc		Type LO	Description	Amendment	Amount \$2,000.0	
10/13/2014	2481 Surf Rd Panacea, Fl 32346		didate					
1								
1 1								
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j j								
j j								
f I								
1 1								
a 29								
1 1								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bill	Anderson	1				_ (2) I.D. Nur	nber	2	19	-
	10/11/	2014		10/17/2	2014					
(3) Cover Period	<b>d</b> /	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
10/17/2014	US Post Office, Crawfordville, Fl 32327	stamps	MO		\$100.50
1					
//	Dollar General, Crawfordville, Fl 32327	parade candy	МО		\$25.15
2					
//					
					,
//					
//					
//					
//					
DS-DE 14 (Rev					