

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Troy A McDonald
 Name
 (2) 917 SE Central Parkway
 Address (number and street)
Stuart, FL 34994
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: City of Stuart, Commissioner, Group 3
 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 individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 07 / 19 / 14 To 07 / 25 / 14 Report Type: 2014 P4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	___	,	___	,	<u>0</u>	.	<u>0</u>
Loans	\$	___	,	___	,	<u>0</u>	.	<u>0</u>
Total Monetary	\$	___	,	___	,	<u>0</u>	.	<u>0</u>
In-Kind	\$	___	,	___	,	___	.	___

(7) Expenditures This Report

Monetary Expenditures	\$	___	,	___	,	<u>0</u>	.	<u>0</u>
Transfers to Office Account	\$	___	,	___	,	___	.	___
Total Monetary	\$	___	,	___	,	<u>0</u>	.	<u>0</u>

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

(9) TOTAL Monetary Contributions To Date
 \$ ___ , 3,175.00

(10) TOTAL Monetary Expenditures To Date
 \$ ___ , ___ , 544.28

(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) Troy A McDonald
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) Troy A McDonald
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature