FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) Malone, John J (2) malone08 I.D. Number Candidate, Committee or Party Name 32404 (3) 707 Plantation Circle Callaway ____ Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): ______CALLAWAY COMMISSIONER WARD 3 Political Committee Check if PC has DISBANDED Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS From 1/1/2008To 3/14/2008 Report Type: M1 Cover Period: 🖊 Original Special Election Report Amendment Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary Cash & Checks Expenditures Transfers to Office 500.00 0.00 Loans Account 500.00 Total Monetary Total Monetary 0.00 0.00 In-Kind (8) Other Distributions (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 82.00 500.00 \$ (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 I certify that I have examined this report and it is true. correct and complete true, correct and complete Name of Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY only) X Signature Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

Malone John J				(2) I.D. Numbermalone08				
(1) Name Malone, John J								
(3) Cover Perio	od	_ through _	3/	14/2008			1 of	
(5) Date	(7)			(8)	(9)	(10)	(11)	(12)
(6)	Full Name (Last, Suffix, First,		Cor	ntributor				
Sequence Number	Street Address City, State, Zip		Туре	Occupation	Contribution Type	In-kind	Amendment	Amount
Tumber	Malone John		I	Candid	LOA	Description	7 Internation	500.00
1/17/2008	7007 Plantation Ci Panama City, FL 32			te				
1								
DS-DE 13 (7/98	SEI SEI	E REVERSE F	OR IN	ISTRUCTIO	NS AND CO	DE VALUES		

DS-DE 13 (7/98)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Malone, John J			(2) I.D. Number		malone08		
(3) Cover Period	1/1/2008	through	3/14/2008	(4) Page	1	of	1	

	odt/1/2000tnrough		4) Page	OI .	
(5)	(7)	(8)	(9)	(10)	(11)
Date (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
2/11/2008	Bay County Election Center 205 Mosley Drive Lynn Haven, FL 32444	Qualifying Fee	MON		82.00
1					
DS-DE 14 (7/98	SEE REVERSE FOR	INSTRUCTIONS AND C	ODE VALUES		