

**FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) DANNY NAIL (2) _____
Candidate, Committee or Party Name I.D. Number

(3) 105 ST. CROIX AVE COCOA BEACH FL 32931
Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):

Candidate (office sought): COMMISSION SEAT 2

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

FINAL RPT
CANDIDATE WITHDREW

Cover Period: From 09 / 05 / 03 To 09 / 23 / 03 Report Type _____

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____ , _____ , 50.00

Loans \$ _____ , _____ , 100.00

Total Monetary \$ _____ , _____ , 150.00

In-kind \$ _____ , _____ , _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____ , _____ , 148.00

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , _____

(8) Other Distributions \$ _____ , _____ , 2.00

(9) TOTAL Monetary Contributions to Date

\$ _____ , _____ , 150.00

(10) TOTAL Monetary Expenditures to Date

\$ _____ , _____ , 150.00

(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 true, correct and complete

HOWARD HANDCASTLE

Name of Treasurer Deputy Treasurer

Howard Handcastle
Signature

I certify that I have examined this report and it is true, correct and complete

DANNY NAIL

Name of Candidate Chairman (PC/AY Only)

Danny Nail
Signature

RECEIVED
SEP 23 2003
CITY CLERK

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DANNY NAIL

(2) I.D. Number _____

(3) Cover Period 09 / 05 / 03 through 09 / 23 / 09

(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
9/5/03 001	CITY OF COCOA BEACH 2 SOUTH ORLANDO AVE COCOA BEACH, FL 32932	FILING FEE	MON		98.00
9/22/03 002	EILEEN J LINDENFELDER 610 S. BREVARD AVE #916 COCOA BEACH, FL 32931	RETURN OF CONTRIBUTION	REF		50.00
9/23/03 003	DANNY NAIL 105 ST. CROIX AVE COCOA BEACH, FL 32931	PARTIAL LOAN RETURN	REF		2.00
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				TOTAL	150.00