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CITY CLERK

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

(1) Mary (Jane) 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): City Commission Seat 3

Political Committee  Check if PC has DISBANDED

Committee of Continuous Existence  Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 09/105/03 To 09/23/03 Report Type Final Rep. Candidate Withdraw

Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_ 100.00

Total Monetary \$ \_\_\_\_\_ 100.00

In-kind \$ \_\_\_\_\_

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ \_\_\_\_\_ 98.00

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

(8) Other Distributions \$ \_\_\_\_\_ 2.00

(9) TOTAL Monetary Contributions to Date

\$ \_\_\_\_\_ 100.00

(10) TOTAL Monetary Expenditures to Date

\$ \_\_\_\_\_ 100.00

(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

Mary Jane Nail

Name of  Treasurer  Deputy Treasurer

Mary Jane Nail  
Signature

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

Mary Jane Nail

Name of  Candidate  Chairman (PC/PTY Only)

Mary Jane Nail  
Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Mary Nail (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 09/05/03 through 09/23/09 (4) Page 1 of 2

(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
9/15/03 001	City of Cocoa Beach 2 South Orlando Ave, Cocoa Beach, FL 32931	Filing Fee	MON		\$98.00
9/22/03 002	Mary Nail 105 St. Croix Ave, Cocoa Beach, FL 32931	Partial Loan Return	Ref		\$2.00
///					
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///					
///					
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				Total	\$100.00

