

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sherri Cox  
 Name  
 (2) 407 Springs Lane  
 Address (number and street)  
Destin, FL 32541  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1306574]

Submitted on:  
 4/10/2024 22:40:22 (eastern)

Check here if address has changed

(3) ID Number: 821

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner, Dist. 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 1 / 1 / 2024 To 3 / 31 / 2024 Report Type: Q1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 650 . 00

Loans \$      , 2 , 000 . 00

Total Monetary \$      , 2 , 650 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 0 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 0 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 13 , 100 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      , 2 , 027 . 37

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name     Sherri Cox     (2) I.D. Number     821      
 (3) Cover Period     1/1/2024     through     3/31/2024     (4) Page     1     of     1    

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
3/5/2024 / /	Campo, James W Sewall's Point Stuart, FL 34966	I	cfp	CH			\$150.00
1							
3/5/2024 / /	SEC CONSULTING, 573 Santa Rosa Blvd Fort Walton Beach, FL 32548	B	consulting	LO			\$2,000.00
2							
3/29/2024 / /	PGB PARTNERSHIP, 420 Santa Rosa Blvd Fort Walton Beach, FL 32548	B	lodging	CH			\$500.00
3							
/ /							
/ /							
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/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sherri Cox

(2) I.D. Number 821

(3) Cover Period 1/1/2024 through 3/31/2024

(4) Page 1 of 0

(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
(6) Sequence Number					
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