

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

(1) Lisa Cullen
Name
(2) 5165 Pine Street
Address (number and street)
Cocoa, FL 32927
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1037844]
Submitted on:
7/11/2012 21:21:43 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 390

(4) Check appropriate box(es):
 Candidate (office sought): Tax Collector
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee
 Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/2012 / / To 9/6/2012 / / Report Type TR4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 675.00

Loans \$ 0.00

Total Monetary \$ 675.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 9,382.94

Transfers to Office Account \$ 0.00

Total Monetary \$ 9,382.94

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 10,015.00

(10) TOTAL Monetary Expenditures To Date
\$ 10,015.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p>X _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lisa Cullen (2) I.D. Number 390

4/1/2012 9/6/2012

(3) Cover Period / / through / / (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
4/13/2012 / /	Fleming, Patricia 975 New Hampton Way MI, FL 32953	I		CH			\$75.00
1							
4/6/2012 / /	Hirschmiller, Karen 4005 Polaris Ave Titusville, FL 32780	I		CH			\$100.00
2							
4/11/2012 / /	Whittington, Sarah 2409 Piedmont Lakes Blvd Apopka, FL 32703	I	retired	CH			\$500.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lisa Cullen

(2) I.D. Number 390

(3) Cover Period 4/1/2012 through 9/6/2012

(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
(6) Sequence Number					
6/5/2012 //	Brev. County Supv of Elections, 400 South Street Titusville, FL 32780	qualifying fee	MO		\$8,369.16
1					
6/11/2012 //	Cullen, Lisa 5165 Pine Street Cocoa, FL 32927	loan repayment	MO		\$300.00
2					
7/11/2012 //	BCC Foundation, 1519 Clearlake Road Cocoa, FL 32922	donation	MO		\$500.00
3					
7/11/2012 //	Sentinels of Freedom Space Coa, 4250 N. Wickham Rd, Suite 103 Melbourne, FL 32935	donation	MO		\$213.78
4					
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//					
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