FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) _____ Repair Our Wetlands **(2)** Candidate, Committee or Party Name I.D. Number (3) 622 SW 23rd Place, Gainesville, FL 32601 Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): X Candidate (office sought) PAC Political Committee Check if PC has DISBANDED Committee of Continuous Existance Check if CCE has DISBANDED ☐ Party Executive Committee (5) Report Identifiers 7/1/2003 - 9/30/2003 Report Type: 03 Q3 Cover Period: X Original Amendment Special Election Report Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary \$ _____0.00 \$ _____0.00 Cash & Checks **Expenditures** Transfers to Office \$_____0.00 \$_____0.00 Loans Account \$____0.00 Total Monetary Total Monetary \$_____0.00 (8) Other Distributions In Kind (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 17,925.00 17,646.37 (11) CERTIFICATION It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13,F.S.) I cerify that I have examined this report and it is I cerify 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)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Repa	(2) I.D. Number13						
(3) Cover Period	1 of0						
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		Contributor Occupation	Contribution Type	In-kind	Amendment	Amount
Number	Oity, Gtate, Zip Gode	Туре	Occupation	Туре	Description	Amendment	Amount

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

1) Name Repair Our Wetlands (2) I.D. Number $\underline{\hspace{1cm}}$						
(3) Cover Perio	d	(4)	Page	1 of _	0	
(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	
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