

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

(1) Paul L. Polk  
**Name**

(2) PO Box 510878  
**Address (number and street)**

Punta Gorda, FL 33951-0878  
**City, State, Zip Code**

**CHECK IF ADDRESS HAS CHANGED**

(4) **Check appropriate box(es):**  
 Candidate (office sought): Property Appraiser

- Political Committee  
 Committee of Continuous Existence  
 Party Executive Committee  
 Electioneering Communication

**CHECK IF PC HAS DISBANDED**  
 **CHECK IF CCE HAS DISBANDED**

**CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**

**OFFICE USE ONLY**

**ONLINE SUBMISSION**  
[1050959]

Submitted on:  
12/22/2012 20:51:50 (eastern)

(3) ID Number: 303

**(5) REPORT IDENTIFIERS**

Cover Period: From 10/13/2012 To 1/9/2013 Report Type TR11

- Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>
In-Kind	\$	<u>0.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

**(8) Other Distributions**  
\$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
\$ 32,293.61

**(10) TOTAL Monetary Expenditures To Date**  
\$ 32,293.61

**(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 electioneering commun.)  Treasurer  Deputy Treasurer

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

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

- (Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

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

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Paul L. Polk (2) I.D. Number 303

10/13/2012 through 1/9/2013

(3) Cover Period    /    /    through    /    /    (4) Page 1 of 0

(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
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Paul L. Polk

(2) I.D. Number 303

10/13/2012 through 1/9/2013

(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) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
12/18/2012 //	Polk, Paul L 152 Sapodilla Street Port Charlotte, FL 33980	repayment of loan	DI		\$1,000.00
1					
12/18/2012 //	Homeless Coalition, P.O. Box 380157 Port Charlotte, FL 33938	disposition of funds/contribut ion	DI		\$750.00
2					
12/18/2012 //	Historical Center Society, 22959 Bayshore Road Charlotte Harbor, Fl 33980	disposition of funds/contribut ion	DI		\$350.00
3					
12/18/2012 //	Imagination Library, Charlotte Players 1182 Murdock Circle Port Charlotte, FL 33952	disposition of funds contribution	DI		\$402.43
4					
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