

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

(1) Barbara T. Scott
Name
 (2) 22430 Albany Ave
Address (number and street)
Port Charlotte,, FL 33952
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1051300]
 Submitted on:
 1/7/2013 16:47:07 (eastern)

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 313

(4) Check appropriate box(es):

- Candidate (office sought): Clerk Of The Circuit Court
 Political Committee **CHECK IF PC HAS DISBANDED**
 Committee of Continuous Existence **CHECK IF CCE HAS DISBANDED**
 Party Executive Committee **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 8/10/2012 To 9/14/2012 / Report Type G1
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ -200.00
 Loans \$ 0.00
 Total Monetary \$ -200.00
 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

\$ 30,295.00

(10) TOTAL Monetary Expenditures To Date

\$ 22,013.31

(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.

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(Type name) _____
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

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

X _____
 Signature

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barbara T. Scott **(2) I.D. Number** 313
(3) Cover Period 8/10/2012 through 9/14/2012 **(4) Page** 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
9/10/2012 / /	Scott, Barbara T P.O. Box 494905 Pt. Charlotte, Fl 33949	S	clerk of court	CH		Delete	\$100.00
1							
9/10/2012 / /	Scott, Barbara T P.O. Box 494905 Pt. Charlotte, Fl 33949	S	clerk of court	CH		Add	\$0.00
2							
9/10/2012 / /	Scott, Barbara T P.O. Box 494905 Pt. Charlotte, Fl 33949	S	clerk of court	CH	ccrc ad.	Delete	\$100.00
3							
9/10/2012 / /	Scott, Barbara T P.O. Box 494905 Pt. Charlotte, Fl 33949	S	clerk of court	CH	ccrc ad.	Add	\$0.00
4							
/ /							
/ /							
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/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barbara T. Scott

(2) I.D. Number 313

(3) Cover Period 8/10/2012 through 9/14/2012

(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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