

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

(1) James Paul Hale  
**Name**  
 (2) 24444 Lakeview Place  
**Address (number and street)**  
Punta Gorda, FL 33980  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1047327]  
 Submitted on:  
 10/17/2012 10:48:44 (eastern)

**CHECK IF ADDRESS HAS CHANGED** (3) ID Number: 319

(4) **Check appropriate box(es):**  
 Candidate (office sought): Supervisor Of Elections  
 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  | \$ | <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>40.24</u> |
| Transfers to Office Account | \$ | <u>0.00</u>  |
| Total Monetary              | \$ | <u>40.24</u> |

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

**(9) TOTAL Monetary Contributions To Date**  
 \$ 7,750.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 5,916.94

**(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.<br><br>(Type name) _____<br><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer<br><b>X</b> _____<br>Signature | I certify that I have examined this report and it is true, correct, and complete.<br><br>(Type name) _____<br><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)<br><b>X</b> _____<br>Signature |
|---|---|

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name James Paul Hale (2) I.D. Number 319

8/10/2012 through 9/14/2012

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

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type      Occupation |  | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-------------|--|--|--|-----------------------------|--------------------------------|-------------------|----------------|
| /      /    |  |  |  |                             |                                |                   |                |
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name James Paul Hale

(2) I.D. Number 319

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

(4) Page 1 of 1

| (5)<br>Date        | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|--------------------|--|--|----------------------------|-------------------|----------------|
| 8/18/2012<br>// // | Hale Jr, James P<br>417 Larurel St<br>Port Charlotte, Fl 33948                                 | remove<br>candidate signs  | MO                         | Add               | \$40.24        |
| 1                  |  |  |                            |                   |                |
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