

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

(1) Herb Stephens  
Name  
(2) 10091 Stonecrop Ave  
Address (number and street)  
Englewood, FL 34224  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1010400]

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 105

(4) Check appropriate box(es):

- Candidate (office sought): Airport Authority District 3  
 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 6/21/2008 To 9/18/2008 / Report Type TRJun

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>664.72</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>664.72</u>

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

**(9) TOTAL Monetary Contributions To Date**  
\$ 1,920.00

**(10) TOTAL Monetary Expenditures To Date**  
\$ 1,940.00

**(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 Herb Stephens (2) I.D. Number 105

6/21/2008 through 9/18/2008

(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 Herb Stephens

(2) I.D. Number 105

6/21/2008 through 9/18/2008

(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
10/13/2008 / /	Artype, Inc., Fort Myers, FL	signs	MO		\$3.98
1					
10/13/2008 / /	Stephens, Herb 10091 Stonecrop Ave. Englewood, FL 34224	pay back loan	MO		\$100.00
2					
10/13/2008 / /	Murdock Baptist Church, 18375 Cochran Blvd. Port Charlotte, FL 33948	building fund	MO		\$560.74
3					
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