

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

(1) Jim Gallagher
Name

(2) PO Box 495995
Address (number and street)

Port Charlotte, FL 33949-5995
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY
ONLINE SUBMISSION
[1012080]

(3) ID Number: 115

(4) Check appropriate box(es):
 Candidate (office sought): Sheriff
 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

(5) REPORT IDENTIFIERS

Cover Period: From 8/27/2008 To 11/24/2008 Report Type TRPri

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>4.90</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>4.90</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>15.81</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>15.81</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 1,729.90

(10) TOTAL Monetary Expenditures To Date
\$ 1,729.90

(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 Jim Gallagher **(2) I.D. Number** 115
 8/27/2008 through 11/24/2008
(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) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
11/1/2008 / /	Gallagher, James J. PO Box 495995 Port Charlotte, FL 33949-5995	I	candidate	CA			\$4.90
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jim Gallagher

(2) I.D. Number 115

(3) Cover Period 8/27/2008 through 11/24/2008

(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					
11/24/2008 / /	Douglas T Jacobson State, Veterans Nursing Home 21281 Grayton Ter Port Charlotte, FL 33954	charitable contribution to close campaign account	MO		\$15.81
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