	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Lynette Halter	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1201375]								
(2)	PO Box 181	Submitted on:								
	Address (number and street) Tallahassee, FL 32302	3/8/2020 21:18:02 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 578								
(4)	Check appropriate box(es):									
(- /	☐ Candidate Office Sought: Tallahassee C	lity Commission - Seat 2								
	Political Committee (PC)									
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded								
	☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
(5) Report Identifiers										
Cove		2 / 29 / 2020 Report Type: 20M2								
		ecial Election Report								
		T								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , <u>100</u> . <u>00</u>	Monetary								
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , <u>100</u> . <u>00</u>	Total Monetary \$, , 69 . 01								
In-Ki	nd \$, , 0.00	, , , , , , , , , , , , , , , , , , , ,								
		(8) Other Distributions								
		\$,, <u>0</u> 0								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, , <u>400</u> . <u>00</u>	\$, , <u>230</u> . <u>37</u>								
	(44) 0	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\								
		tification on 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:										
_(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		×								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Lynette Halter				2) I.D. Numbe	er <u> </u>	78
	2/1/2020		2	/29/2020		_	_
(3) Cover Peri	od / /	thro	ough	<i>I I</i>	(4) Pag	je ¹	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
2/27/2020	Halter, Lynette PO Box 181 Tallahassee, FL 32302	S	retired	СН			\$100.0
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1 1							
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Lynette	Halte	r				 (2) I.D. Num	nber	5	78	-
	2	/1/20:	20		2/29/20	20					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
2/17/2020	Express Printing, 927 N. Monroe St Tallahassee, FL 32303	print petitions	МО		\$53.75
1					
2/7/2020	Voo Doo Dog Restaurant, 805 S Macomb Tallahassee, FL 32301	dining	МО		\$11.26
2					
2/28/2020	The First Bank, 2000 Apalachee Parkway Tallahassee, FL 32301	banking fees	МО		\$4.00
3					
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