CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Lynette Halter	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1211419]							
(2)	PO Box 181	Submitted on:							
	Address (number and street) Tallahassee, FL 32302	6/18/2020 17:48:50 (eastern)							
	City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 578							
(4)		(9) ID Number							
(4)	Check appropriate box(es): X Candidate Office Sought: Tallahassee C.	lity Commission - Seat 2							
	Political Committee (PC)	Tty Commission Seac 2							
	☐ 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							
	individual making electioneering communications)	Check here if no other IE or EC reports will be filed							
		dentifiers							
Cove	er Period: From $\underline{6}$ / $\underline{1}$ / $\underline{2020}$ To	6 / 12 / 2020 Report Type: 20P1							
X O	Original Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	h & Checks \$, , 490 . 00	Monetary							
Loar	s,,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00							
Tota	al Monetary \$, , <u>490</u> . <u>00</u>	Total Monetary \$, , 0 . 00							
In-Ki	ind \$, , 2 . <u>15</u>								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
` '	\$,, 890 . 00	\$, , 87							
	(11) Cert It is a first degree misdemeanor for any perso								
I certify that I have examined this report and it is true, correct, and complete:									
Certify that thrave examined this report and it is true, correct, and complete.									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		x							
Si	ignature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	nette Halte	r			(2) I.D. Number			578	
	6/1/2020			6/12/	2020				
(3) Cover Period	1	1	through	7	1	(4) Page	1	of	1

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6/5/2020	Halter, Lynette P. O. Box 181 Tallahassee, FL 32302	S	self - retired	CA			\$450.0
6/5/2020	Wood, PG 50 Arglyle St. Sopchoppy, FL 32358	I	retired	CA			\$40.0
6/10/2020	Halter, Lynette P.O.Box 181 Tallahassee, FL 32301	S		IK	campaign material.		\$2.1
j j							
j j							
1 1							
1 1							
1 1							

(1) Name Lynet	CAMPAIGN TREASURER'S I		EXPENDIT 2) I.D. Number		578
	6/1/2020 /through	/12/2020	l) Page <u>1</u>		0
(5) Date (6) Sequence Number	(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)	(11)
//					
//					
//					
//					
//					
//					
//					
//					