

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lynette Halter
 Name
 (2) PO Box 181
 Address (number and street)
Tallahassee, FL 32302
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1227994]
 Submitted on:
 8/27/2020 16:38:04 (eastern)

Check here if address has changed (3) ID Number: 578

(4) Check appropriate box(es):
 Candidate Office Sought: Tallahassee City Commission - Seat 2
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 19 / 2020 To 11 / 16 / 2020 Report Type: 20T3
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00
 Loans \$, , 0 . 00
 Total Monetary \$, , 0 . 00
 In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 93 . 17
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 93 . 17

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 1 , 340 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 1 , 340 . 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:

(Type name) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)
X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lynette Halter (2) I.D. Number 578

8/19/2020 through 11/16/2020

(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 Lynette Halter

(2) I.D. Number 578

(3) Cover Period 8/19/2020 through 11/16/2020

(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
8/25/2020 / /	The First Bank, 2000 Apalachee Parkway Tallahassee, FL 32301	reimburse self	RM	Delete	\$109.95
1					
8/25/2020 / /	Halter, Lynette Y P.O. Box 181 Tallahassee, FL 32302	reimburse self	MO	Add	\$203.12
2					
/ /					
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