CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Lynda Gayle Bell	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1285899]							
(2)	19690 Crows Ln	Submitted on:							
	Address (number and street) Tallahassee, FL 32310	10/30/2022 16:47:39 (eastern)							
	City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 681							
(4)	Check appropriate box(es):								
	 ☑ Candidate Office Sought: Leon County Commission - District 2 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	Identifiers							
	er Period: From 10 / 22 / 2022 To	11 / 3 / 2022 Report Type: 22G6							
<u> </u>	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$,,,	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , 000	Total Monetary \$. 35 . 47							
In-Ki	s	,,							
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$,31_, _80000								
(T)	(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 Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)								
_X Si	gnature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Lynda Gayle Bell	(2) I.D. Number							
	10/22/2022		1	1/3/2022					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of		
				r					
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount		
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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	Lynda	Gayle	Bell				 (2) I.D. Nur	nber	6	581	
		10/22	2/2022	2	11/3/	2022	**				
(3) Cover Pe	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
10/25/2022	Bell, Lynda 19690 Crows Ln Tallahassee, Fl 32310-9346	refund partial loan and close account	МО		\$35.47
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