FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) ____ Leon County Voter Fund **(2)** Candidate, Committee or Party Name I.D. Number (3) P O Box 180578, Tallahassee, FL 32318 Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought) Political Committee Political Committee Check if PC has DISBANDED Committee of Continuous Existance Check if CCE has DISBANDED ☐ Party Executive Committee (5) Report Identifiers 10/9/2004 - 10/28/2004 Report Type: 04-G4 Cover Period: X Original Amendment Special Election Report Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary \$ _____0.00 \$ _____0.00 Cash & Checks **Expenditures** Transfers to Office \$_____0.00 \$_____0.00 Loans Account Total Monetary Total Monetary (8) Other Distributions In Kind (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 50.00 39.80 (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 I certify that I have examined this report and it is true, correct and complete. true, correct and complete. Name of Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Leon County Voter Fund					(2) I.D. Number62				
(3) Cover Period10/9/2004 - 10/28/2004				1 of1					
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		Contributor Occupation	Contribution Type		Amendment	Amount		
	Penton, Misty POBox 180578 Tallahassee, Fl 32318	I		IK	Printing of brochu re		\$83.76		

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name $^{\mathrm{Leo}}$	n County Voter Fund	(2)	I.D. Number	r <u>62</u>	
(3) Cover Perio	d10/9/2004 - 10/28/2004	(4)	Page	of	0
(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