FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Give Us A Choice PAC	OFFICE USE ONLY 87					
Name (2) 2007 Middlewood Drive, Tallahassee, FL 3	2212					
(2) 2007 Middlewood Drive, Tallahassee, FL 3 Address (number and street)	2312					
Address (Hallisel and street)						
City, State, Zip Code						
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:					
(4) Check appropriate box(es):						
☐ Candidate (office sought): ☒ Political Committee	CHECK IF PC HAS DISBANDED					
Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED					
☐ Party Executive Committee						
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED					
(5) REPORT						
Cover Period: From 10/24/2005 To	11/12/2005 / Report Type 05-G2					
☐ Original Amendment ☐ Special Election	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$5,487.00	Monetary Expenditures \$ 0.00					
Loans \$	Transfers to Office Account \$ 0.00					
Total Monetary \$ 5,487.00	Total Monetary \$ 0.00					
In-Kind \$						
	(8) Other Distributions \$0.00					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$ 66,114.22	\$56,323.85_					
(11) CERTIFICATION						
It is a first degree misdemeanor for any pers	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. I certify that I have examined this report and it is true, correct, and complete.						
(Type name)	(Type name)					
Individual (only for electioneering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)					
X	X					
Signature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) NameGive Us A Choice PAC				(2) I.D. Number			
	10/24/2005			1/12/2005				
(3) Cover Perio	od//	thre			(4) Pa	ge $_{}^{1}$	of $\frac{1}{}$	
	1		3	r				
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)	_	and the later of	Cautaiteatica	For Laborat			
Sequence Number	Street Address & City, State, Zip Code	Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
Number	Gift Scenario, Inc.		business	СН	Description	Add	\$2,000.00	
11/12/2005		_				1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1 1	2251 NE 20th Street SE N. Miami Beach, FL 33180							
1	HI HIGHE BOOM, I'D SSION							
	National Resources	0	environme	СН		Add	\$3,487.00	
11/10/2005 / /	Defense Cou, 1200 New York Ave. NW		ntal			1		
r i	Suite 400		organizat ion					
2	Washington, DC 20005							
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(1) NameGive	ED EXPENDITURES (2) I.D. Number87				
	10/24/2005	11/12/2005			
(3) Cover Period	/through_		4) Page1	of _	0
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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