

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Lisa Raleigh  
Name

(2) 2799 Armistead Road, Tallahassee, FL 32308  
Address (number and street)

City, State, Zip Code

**OFFICE USE ONLY** 90

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate (office sought): Leon County Judge - Seat 3

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 IDENTIFIERS**

Cover Period: From 7/1/2005 To 9/30/2005 Report Type 05-Q3

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>3,530.00</u>
Loans	\$	<u>20,000.00</u>
Total Monetary	\$	<u>23,530.00</u>
In-Kind	\$	<u>93.45</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>53.52</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>53.52</u>

**(8) Other Distributions**  
\$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
\$ 23,530.00

**(10) TOTAL Monetary Expenditures To Date**  
\$ 53.52

**(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 electioneering commun.)  Treasurer  Deputy Treasurer

**X**  
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

**X**  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name     Lisa Raleigh     (2) I.D. Number     90      
 7/1/2005 through 9/30/2005  
 (3) Cover Period     /    /     through     /    /     (4) Page     1     of     2    

(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
(6) Sequence Number		Type	Occupation				
9/8/2005 / /	Hsu, Theodore C. 5345 Underwood Ave Oakland, CA 94613-0005	I	stay at home father	CH			\$500.00
1							
9/8/2005 / /	Sharkey, Tara J. 5345 Underwood Ave Oakland, CA 94613-0005	I	student	CH			\$500.00
2							
9/8/2005 / /	Raleigh, Lisa M. 2799 Armistead Rd Tallahassee, FL 32308	I	attorney- candidate	LO			20,000.00
3							
9/14/2005 / /	Hartsfield, Shannon B. 2795 Armistead Rd Tallahassee, FL 32308	I	attorney	CH			\$250.00
4							
9/19/2005 / /	Bevington, Elizabeth L. 1398 Freeman Rd Lamont, FL 32336	I	attorney	CH			\$500.00
5							
9/22/2005 / /	Fons, John P. 2480 Elfinwing Lane Tallahassee, FL 32309	I	governmen tal consultant	CH			\$250.00
6							
9/22/2005 / /	Holcomb, Mark E. 1816 Chimney Swift Hollow Tallahassee, FL 32312	I		CH			\$50.00
7							
9/26/2005 / /	Kimbell, Don 1398 Freeman Rd Lamont, FL 32336	I		IK	food for breakfast fundraiser		\$93.45
8							



**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Lisa Raleigh

(2) I.D. Number 90

(3) Cover Period 7/1/2005 through 9/30/2005

(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
(6) Sequence Number					
9/14/2005 //	Kilinski, Jennifer 155 Richardson Rd Crawfordville, FL 32327	reimburse for color copies from kinkos	MO		\$53.52
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