FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) CITIZENS FOR HONESTY IN GOVERNMENT	OFFICE USE ONLY						
Name	ONLINE SUBMISSION						
(2) 5400 SW COLLEGE RD	[1054228]						
Address (number and street) OCALA, FL 34474	Submitted on:						
City, State, Zip Code	4/9/2013 14:45:15 (eastern)						
CHECK IF ADDRESS HAS CHANGED	(3) ID Number: 207						
(4) Check appropriate box(es): Candidate (office sought): Example Political Committee Committee Committee Party Executive Committee Electioneering Communication CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED							
-	COMMUNICATION REPORTS WILL BE FILED						
(5) REPORT I	3/31/2013						
Cover Period: From / / / 10							
	Report Independent Expenditure Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$	Monetary Expenditures \$ 97.68						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total Monetary \$ 97.68						
In-Kind \$ 0.00							
	(8) Other Distributions \$ 0.00						
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$						
(11) CERT							
It is a first degree misdemeanor for any pers							
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) Individual (only for Treasurer Deputy Treasurer	(Type name) Candidate Chairperson (only for PC, PTY &						
Individual (only for Treasurer Deputy Treasurer election eering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)						
X	X						
Signature	Signature						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	CITIZENS FOR HONES	TY IN GOVERNM		ال . Numbe	=1"2	207
(2) Carray Dagin	1/1/2013	through	3/31/2013	(4) D	je ¹	of _0
(3) Cover Perio	od//	trirough	_ ' '	(4) Pag	je <u> </u>	or
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1						
1 1						
1 1	-					
1 1						
1 1						
1 1						
f I						
1 1						
		L L	1		l .	

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	CITIZEN	IS FO	R HONE	STY IN GO	VERNMENT		 (2) I.D. Numb	oer	2	207	av.
	1	/1/20	13		3/31/20	013					
(3) Cover Pe	riod	1	1	through	/	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
3/8/2013	POSTNET, 5400 SW College Rd Ocala, FL 34474	mail services	MO		\$97.68
1				-	
_//					
//					
//					
//					
//					
//					
//					