

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

(1) SOUTH BAY COMMUNITY POLITICAL ACTION COMMITTEE (2) _____
Candidate, Committee or Party Name I.D. Number

(3) 25121 S.W. 120th PLACE PRINCETON FL 33032
Address (number and street) City State Zip Code

Check box if address has changed since last report

(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

(5) REPORT IDENTIFIERS

Cover Period: From 5 / 15 / 03 To 6 / 30 / 03 Report Type Q2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____ , _____ , 501 . 00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , _____

In-kind \$ _____ , _____ , 000 . 00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____ , _____ , _____

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , _____

(8) Other Distributions \$ _____ , _____ , _____

(9) TOTAL Monetary Contributions to Date

\$ _____ , _____ , 501 . 00

(10) TOTAL Monetary Expenditures to Date

\$ _____ , _____ , 0 . 00

(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

LEONARD S. ANTHONY

Name of Treasurer Deputy Treasurer

X Leonard S Anthony
Signature

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

BARBARA DODSON

Name of Candidate Chairman (PC/PTY Only)

X Barbara Dodson
Signature

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name SOUTH BAY COMMUNITY POLITICAL ACTION COMMITTEE (2) I.D. Number _____

(3) Cover Period 5 / 15 / 03 through 6 / 30 / 03 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
5 / 13 / 03	WILLIAM LOSUER % FIRST NATIONAL BANK OF SOUTH FLORIDA 1550 N. KROME AVE HOMESTEAD, FL 33030	B	BANKING	CAS			\$ 1.00
Q2-1							
5 / 14 / 03	WILLIAM LOSUER % FIRST NATIONAL BANK OF SOUTH FLORIDA 1550 N. KROME AVE HOMESTEAD, FL 33030	B	BANKER	CAS			\$ 500.00
Q2-2							
1 / 1							\$
1 / 1							\$
1 / 1							\$
1 / 1							\$
1 / 1							\$
1 / 1							\$
1 / 1							\$

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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SOUTH BAY COMMUNITY POLITICAL ACTION COMMITTEE

(2) I.D. Number _____

(3) Cover Period 5/15/03 through 6/30/03

(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					
/ /	<i>NONE</i>				\$ 0.00
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/ /				METRO DAVIE COUNTY ELECTIONS DEPARTMENT RECEIVED 2003 JUL -7 AM 9:44	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

THIS FORM APPLIES TO POLITICAL COMMITTEES, COMMITTEES OF CONTINUOUS EXISTENCE AND PARTY EXECUTIVE COMMITTEES ONLY.

(1) Name South Bay Community Political Action Committee

(2) I.D. Number _____

(3) Cover Period 5 / 15 / 03 through 6 / 30 / 03

(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) Related Expenditures	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /	NONE				\$ 0.00
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