FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) BRICKEZL NEIGHBORHOOD ;	OFFICE USE ONLY					
(2) Name SE 25th ROAD SUI	OO2 TE					
Address (number a <u>nd street)</u> 111Am 1 + 2 33129	·					
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 IDENTIFIERS						
Cover Period: From 10 / 1 / 67 To	12 31 01 Report Type Q 4					
☑ Original ☐ Amendment ☐ Special Election I	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
	Monetary					
Cash & Checks \$	Expenditures \$,					
Loans \$, ,	Transfers to Office					
<u> </u>	Account \$, m3.					
Total Monetary \$, , <u>/0</u> <u>4/3</u>	Total 03					
	Monetary \$, , ,					
In-Kind \$,	2					
·	(8) Other Distributions					
	* — · — · — · *					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$,	\$, , <u>&</u>					
(11) CERT	IFICATION					
	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) GLORIN HONSCER (Type name) T. SINCLAIR JACOBS						
☐ Individual (only for ☐ Treasurer ☐ Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC, PTY &					
electioneering commun.)	electioneering commun. organization)					
Signature Signature	Signature Jacobs					
- Janyani G	Oignature (

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

-		<i>*</i>	1/1	
	V Thomas m. 11/1			•
(1) Name	BRICKELLNE	こんみおりとみつめ	/Ac(2) I.D. Number	
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(3) Cover Period	10 1 1 107 t	hrough	12.13	1107	(4) Page	e of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Со Туре	ntributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10, 19,07	COLONIAL BANK 1200 BRICKELL MIAM! FL 33131	B	INT	CA-SI+			.13
11/21/07	COLONIAL BANK	B	INT	CASH		,	.16
12,12,07	TORY JACOBS 145-56 25 HRD SUITE 1002 MIAMIFL 33129			CASH		·	10.00
12,20,07	COLOUIAL BANK	B	INT	CA5H			.14
/ /					,	. 1	2008
						MIAMI-DA	ECEIVI IAN-8 AM
						DE	<u>-</u> څ
1 1				·			

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES