

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

(1) Sallie Skipper  
Name  
(2) 5653 Main St  
Address (number and street)  
New Port Richey, Fl 34652  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1015916]  
Submitted on:  
1/5/2010 11:03:16 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 286

(4) Check appropriate box(es):  
 Candidate (office sought): School Board Member District 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 10/1/2009 To 12/31/2009 Report Type Q4  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 1,670.00  
 Loans \$ 10,000.00  
 Total Monetary \$ 11,670.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 0.00  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 0.00

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

**(9) TOTAL Monetary Contributions To Date**  
 \$ 11,670.00

**(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.)**

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p><b>X</b> _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY &amp; electioneering commun. organization)</p> <p><b>X</b> _____</p> <p>Signature</p>
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Sallie Skipper (2) I.D. Number 286  
 10/1/2009 12/31/2009  
 (3) Cover Period  / /  through  / /  (4) Page 1 of 1

(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							
10/26/2009 / /	Skipper, Sallie 5653 Main St New Port Richey, FL 34652	I	candidate	LO	open campaign account		\$10,000.00
1							
10/29/2009 / /	Parks, Evie 6801 Rowan Road New Port Richey, FL 34653	I	gift planner	CH			\$50.00
2							
11/4/2009 / /	Coulter, Pamela W 4407 W Dale Avenue Tampa, FL 33609	I	homemaker	CH			\$500.00
3							
11/4/2009 / /	DeCillis, Marie 12726 Balsam Avenue Hudson, FL 34669	I	paralegal	CH			\$20.00
4							
11/4/2009 / /	F J Velten & Sons Inc, 5701 Main Street New Port Richey, FL 34652	B	financial planning	CH			\$500.00
5							
11/17/2009 / /	Joseph A Porcelli, PA, 4644 Glissade Drive New Port Richey, FL 34652	B	attorney	CH			\$500.00
6							
11/23/2009 / /	Lopez, Pamela Rae 3139 Bluff Blvd Holiday, FL 34691	I	homemaker	CH			\$100.00
7							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sallie Skipper

(2) I.D. Number 286

(3) Cover Period 10/1/2009 through 12/31/2009

(4) Page 1 of 0

(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					
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