

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

(1) Joanne B. Hurley  
**Name**  
 (2) PO Box 1379  
**Address (number and street)**  
Land O Lakes, FL 34639  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1045143]  
 Submitted on:  
 9/21/2012 07:53:09 (eastern)

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 443

**(4) Check appropriate box(es):**

- Candidate (office sought): School Board Member District 2  
 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 8/10/2012 To 11/12/2012 Report Type TR-P

- Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 200.00  
 Loans \$ 0.00  
 Total Monetary \$ 200.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 1,072.13  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 1,072.13

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

**(9) TOTAL Monetary Contributions To Date**  
 \$ 19,275.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 19,275.00

**(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.

(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 Joanne B. Hurley (2) I.D. Number 443

(3) Cover Period 8/10/2012 through 11/12/2012 (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
9/5/2012 / /	Richey, City of New Port 5919 Main Street New Port Richey, FL 34652	0	sign bond	RE			\$100.00
1							
9/11/2012 / /	Dade City, City of 38020 Meridian Ave. P.O. Box 1355 Dade City, FL 33526	0	sign bond	RE			\$100.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Joanne B. Hurley

(2) I.D. Number 443

(3) Cover Period 8/10/2012 through 11/12/2012

(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
8/26/2012 //	Elections, Pasco Supervisor of P.O. Box 300 Dade City, FL	labels	MO		\$10.00
1					
9/20/2012 //	Hurley, Joanne P.O. Box 1379 Land O, FL 34639	repay loans from candidate	RE		\$1,062.13
2					
9/20/2012 //	Society, American cancer 21756 S.R. 54 Suite 101 Lutz, FL 33549	close out campaign acct	DI		\$122.68
3					
//					
//					
//					
//					
//					