

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

(1) Patricia A. Tobin
Name
 (2) 1816 SE Hideaway Circle
Address (number and street)
Port St. Lucie, FL 34952
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1025657]
 Submitted on:
 11/15/2010 22:05:21 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 147

(4) **Check appropriate box(es):**
 Candidate (office sought): County Commissioner, District 2
 Political Committee **CHECK IF PC HAS DISBANDED**
 Committee of Continuous Existence **CHECK IF CCE HAS DISBANDED**
 Party Executive Committee **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 8/20/2010 To 11/19/2010 Report Type TR
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 350.00
 Loans \$ 0.00
 Total Monetary \$ 350.00
 In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 933.83
 Transfers to Office Account \$ 0.00
 Total Monetary \$ 933.83

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 12,550.00

(10) TOTAL Monetary Expenditures To Date
 \$ 12,550.00

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

(1) Name Patricia A. Tobin **(2) I.D. Number** 147
(3) Cover Period 8/20/2010 through 11/19/2010 **(4) Page** 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
9/21/2010 / /	Faiella Campaign, Joann 2234 SW Import Dr. PSL, FL 34953	0		CH	refund of advertisin g expenses		\$100.00
1							
9/17/2010 / /	Port St. Lucie, City of 121 SW Port St Lucie Blvd PSL, FL 34984	0	government	CH	returned check for sign removal (check #110)		\$250.00
2							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Patricia A. Tobin

(2) I.D. Number 147

8/20/2010 through 11/19/2010

(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) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
8/26/2010 / /	Grill & Wings, Hurricane Veterans Memorial Parkway PSL, FL 34952	campaign party	MO		\$415.00
1					
8/26/2010 / /	Signs , Budget 1976 SW Bayshore Blvd PSL, FL 34984	advertising banner	MO		\$100.00
2					
8/26/2010 / /	Tobin, Patricia 1816 SE Hideaway Cir PSL, FL 34952	loan repayment	MO		\$418.83
3					
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