CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Nora H. Hall	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	Protected Address	Submitted on:							
	Address (number and street)	11/9/2020 20:05:03 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 605							
(4)	4) Check appropriate box(es):								
	Candidate Office Sought: County Judge	Group 6							
	☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
	Party Executive Committee (PTY)	Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Repor	t Identifiers							
Cove	er Period: From <u>10</u> / <u>1</u> / <u>201</u> 9 To	10 / 31 / 2019 Report Type: M10							
□ 0	riginal Amendment Sp	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	n & Checks \$, , 0 . 00	Expenditures \$, , -53 . 23							
	•								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to							
	Ф 0.00	Office Account \$, , 0 . 00							
Tota	I Monetary \$, ,000	Total Manatany (* 53. 63.							
	. • • • • • • • • • • • • • • • • • • •	Total Monetary \$, , _53 . 23							
In-Ki	find \$	(a) O(1 - B) (11 - (1							
		(8) Other Distributions \$, , 0.00							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>56</u> , <u>602</u> . <u>93</u>	\$							
	440.6								
(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:									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		x							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Nora H. Hall				2) I.D. Numbe	r6	05
	10/1/2019		1	0/31/2019		1	0
(3) Cover Perio	od/	thro	ough	<i>l l</i>	(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	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
	,		paration paration	3 J			<u> </u>
1 1							
1 1							
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1 1							
1 1		,					
1 1							

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _N	Nora	Н.	Hall					 (2) I.D. Nun	nber	6	505	
		1	0/1/20	019		10/31/	2019	-				
(3) Cover Po	eriod		I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/1/2019	Sporting Goods, Dicks 2500 W. Intn'l Spdwy Blvd Daytona Beach, FL 32114	tent	МО	Delete	\$53.23
1 10/1/2019	Goods, Dick's Sporting 2500 W. Intn'l Spdwy Blvd Daytona Beach, FL 32114	tent	MO	Add	\$0.00
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DS-DE 14 (Rev.	(4440.)		L		J