		•	SU_{L}						
-		FLORIDA DEPARTMENT OF ST							
\$	195		R S REPORT SUMMARY						
	UX.	Name 2 1 11 MATC	OFFICE USE ONLY						
	(2)	Address (number and street) 20523							
	(JULION THE DOUS	t _z						
		City, State, Zip Codé	(3) ID Number:						
	(4)	Check appropriate box(es):	(3) ID Number:						
		□ Candidate (office sought): □ Political Committee	Candidate (office sought): _OWITC OT MASSION & USTRICT #2						
		Committee of Continuous Existence	CHECK IF FC HAS DISBANDED						
		Party Executive Committee Electioneering Communication							
			COMMUNICATION REPORTS WILL BE FILED						
	(5) REPORT IDENTIFIERS								
			Report Independent Expenditure Report						
		CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
		* Checks \$, ,700.00	Monetary Expenditures \$, , パローハン						
	Casr	a & Checks ,, <u>700</u> . <u>OD</u>	Expenditures \$ _ , _ , [92 .00						
	Loan	ns \$,, <u>0</u> .00_	Transfers to Office Account \$, , , , , , , , , , , , , , , , , ,						
	Total	Monetary \$, _ , 700 . 00	Account \$, , 0 . 06						
	.0101		Monetary \$, , 192.00						
	In-Ki	nd \$, <u>0</u> <u>00</u>							
			(8) Other Distributions \$, , ,						
	(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date \$,,2034 O(D						
	(11) CERTIFICATION It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)								
	l certi comp	ify that I have examined this report and it is true, correct, and plete.	I certify that I have examined this report and it is true, correct, and complete.						
	_q	vpe name ASENA. MAITE	(Type name) AMRS N. White						
		Individual (only for Deputy Treasurer	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)						
	1	Saled). () (RU	× James L. White						
		ignature	Signature						
	DS-DI	E 12 (Flev. 08/04)	·						

FLORIDA DEPARTMENT OF ST CAMPAIGN TREASURE	ATE DIVISION OF ELECTIONS R S REPORT SUMMARY									
In James Leon White	OFFICE USE ONLY									
12) Bross Seine Dr.										
Address (number and street) 05.07										
City, State, ZipCode	0									
	(3) ID Number:									
(4) Check appropriate box(es):	issimer District #21									
Candidate (office sought):										
Committee of Continuous Existence										
(5) REPORT	IDENTIFIERS									
Cover Period: From 09 / 01 / 00 To	09 / 10 / 00 Report Type Q3									
Original Amendment Special Election F	Report Independent Expenditure Report									
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT									
	Monetary									
Cash & Checks \$,, 100 · 00	Expenditures , , , , , , , , , , , , , , , , , ,									
Loans \$, <u>0</u> .00	Transfers to Office									
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Total Monetary \$,,, 00000	Monetary $\$$, $192.(Y)$									
In-Kind \$,, 0_00										
	(8) Other Distributions \$, , ,									
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
\$,, <u>100</u> .00_	\$,, 192, 00									
	TIFICATION son to falsify a public record (ss. 839.13, F.S.)									
I certify that I have examined this report and it is true, correct, and	I certify that I have examined this report and it is true, correct, and									
complete.	complete.									
(Type name) ASPAN, KVIII	(Type name) MMES L, WHITE									
electioneering community	Candidate Chairperson (only for PC, PTY & electioneerjing commun. organization)									
$(\Box) (\Box)$	Xt. J.J.									
Signature	91165 (Beerre									
DS-DE 12 (Fev. 08/04)										
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	4) 3403									

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(1) Name		ames l	1. 11	Y [-	TC	(2) I.D. Numb	er	
(3) Cover	Peric	od <u>08</u> / <u>C</u>	<u> / 01</u>	e ^{thr}	ough 08	1810	<u>ட</u> ு (4) Pag	ge _/_	_ of
(5) Date		(7) Full Na	ime		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number		(Last, Suffix, Fi Street Add City, State, 2	ress & Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amour
08/14/	a	Hayes, Ral 3950 Oakle	phi Glenda idn Dr:		Retired				n
151		Jay, FL 3	2565	- 	Exxon- Mobil	CHE			200
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(3) Cover Period	() 1 0 1 0 10 through () 1 1 0 1 0 (4) Page of					
(5) Date (6) Sequence Number	(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	(1) Amo	
08, 17,06 H	Mainun	Yard Signs	MON		192	
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