	
	STATE DIVISION OF ELECTIONS RER'S REPORT SUMMARY
(1) Joseph M. Pool Name	OFFICE USE ONLY
(2) 5464 Lilac Ave Address (number and street) Mi Hon FL 32570 City, State, Zip Code	
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:
Political Committee Committee of Continuous Existence Party Executive Committee	CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
•	RT IDENTIFIERS
Cover Period: From 1 / 1 / 12 T	o 3 / 31 / 12 Report Type
Original Amendment Special Elect	ion Report
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT
Cash & Checks \$	Monetary Expenditures \$ 91.76
Loans \$	Transfers to Office Account \$
Total Monetary \$ 100.00	Total Monetary \$ 91.76
In-Kind \$	11,70
	(8) Other Distributions \$
9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$ 91,76
(11) CER	TIFICATION
certify that I have examined this report and it is true,	I certify that I have examined this report and it is true,
orrect, and complete.	correct, and complete.
(Type name) Joseph M. Pool Individual (only for electioneering commun.) Treasurer Deputy Treasure	(Type name) Joseph M. Pool Candidate Chairperson (only for PC, PTY & electioneering commun organization)
X Jesysh Man	X Joseph M. Pool Signature
Oignotate V	Signature //

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Joseph M.	2001		(2)) I.D. Number	·	
_ (3) Cover Period	01/01/12	- throu	igh 03	31 / 12	– (4) Page	•	of
(5) Date	(7)		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
81,24,12	Joseph Real	工		CAS			100.00
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11	-						
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1 1							
1 1							
1 1							
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

DS-DE 13 (Rev. 08/03)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES						
(1) Name	Joseph	M. Pool		(2) I.D. Number_		
(3) Cover Period	1.01.101	/12 through 63	131 / 12	(A) Page	of	

				,	
(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
1/27/12	Office Depot buy 90	(oprès (Petitions)	MON		19.92
1/29/12	Wal Mart Huy 90	Envelopos, Pens	MON		6.01
1/31/12	Harland Checks SRCFCU	Campaigh Checks	MON		16,93
3/2/12	Supervisor of Elections	Petitions	Mon		48,90
//					
1 /					