## FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) Haynes, Harold Candidate, Committee or Party Name 32444 **(3)** 1312 Alabama Ave Lynn Haven Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): \_\_\_\_\_\_LYNN HAVEN COMMISSIONER SEAT 4 Political Committee Check if PC has DISBANDED Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS From Open To 3/21/2003 Report Type: M1 Cover Period: 🗸 Original Special Election Report Amendment Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary Cash & Checks Expenditures Transfers to Office 0.00 80.00 Loans Account 80.00 Total Monetary Total Monetary 0.00 0.00 In-Kind (8) Other Distributions (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 63.12 80.00 \$ (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 I certify that I have examined this report and it is true. correct and complete true, correct and complete Name of Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY only) X Signature Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Haynes, Harold				(2) I.D. Number haynes					
(3) Cover Period Open through							1 of _			
	(7)	tillough _		(8)	(9)	(10)	(11)	(12)		
(5) Date	Full Name		Cor	ntributor		(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, Firs Street Addre City, State, Zi	ess &	Туре		Contribution	In-kind	Amendment	Amount		
Number	Haynes Harold		I	Candid	Type LOA	Description	Amenament	80.00		
3/6/2003	1312 Alabama Aver Lynn Haven, Fl 32			te						
1										
DS-DE 13 (7/98	S) S1	EE REVERSE F	OR IN	STRUCTIO	NS AND CO	DE VALUES				

DS-DE 13 (7/98)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Hayne	(2) I.D. Nur	haynes					
(3) Cover Period	Open	through	3/21/2003	(4) Page	1	of	1	

Full Name	D.	l		
(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
Supervisory of Election 205 Mosley Drive Lynn Haven, Fl 32444	Checking list of voter names	MON		3.00
City of Lynn Haven 825 Ohio Avenue Lynn Haven, Fl 32444	Quality Fee	МОМ		60.12
	Supervisory of Election 205 Mosley Drive Lynn Haven, Fl 32444  City of Lynn Haven 825 Ohio Avenue Lynn Haven, Fl 32444	Supervisory of Election 205 Mosley Drive Lynn Haven, Fl 32444  City of Lynn Haven 825 Ohio Avenue Lynn Haven, Fl 32444  Quality Fee	Supervisory of Election 205 Mosley Drive Lynn Haven, Fl 32444  City of Lynn Haven 825 Ohio Avenue Lynn Haven, Fl 32444  Quality Fee  MON  MON  MON  MON	Supervisory of Election 205 Mosley Drive Lynn Haven, Fl 32444  City of Lynn Haven 825 Ohio Avenue Lynn Haven, Fl 32444  MON  Quality Fee  MON  MON  MON  MON  MON  MON  MON  M