CAMPAIGN TREASURER'S REPORT SUMMARY (1) Sheffield, Sharon J (2) ____ sheffield Candidate, Committee or Party Name 32444 (3) 1508 Wisconsin 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): _____COUNTY COMMISSION, DIST 1 (Primary/General) 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 Close Report Type: TRG Cover Period: 🗸 Original Special Election Report Independent Expenditure Report Amendment (7) EXPENDITURES THIS REPORT (6) CONTRIBUTIONS THIS REPORT Monetary 100.00 1,380.71 Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 100.00 1,380.71 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 12,076.00 12,076.00 \$ (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. true, correct and complete correct and complete Name of Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY only) X Signature Signature

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sheffield, Sharon J				(2) I.D. Number <u>sheffield</u>				
(3) Cover Period 10/31/2008 through						1of			
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date (6)	Full Name (Last, Suffix, First, Middle)	Cor	ntributor						
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	In-kind Description	Amendment	Amount		
11/5/2008	Panama City Downtown Improvement Board 413 Harrison Ave	0	Festiv l organi	REF			100.00		
1	Panama City, FL 32401		er						
DS-DE 13 (7/98	SEE REVERSE I	OR IN	ISTRUCTIO	NS AND CC	DE VALUES				

DS-DE 13 (7/98)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Sheffiel	_ (2) I.D. Nur	nber	sheffield				
(3) Cover Period	10/31/2008	through	Close	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
11/15/2008	Sheffield Sharon J 1508 Wisconsin Ave Lynn Haven, FL 32444	Repay loans to candidate	MON		1,300.00
1					
12/4/2008	Sheffield Sharon J 1508 Wisconsin Ave Lynn Haven, FL 32444	Repay candidate	MON		80.7
2					
DS-DE 14 (7/98	SEE REVERSE FOR	INSTRUCTIONS AND C	ODE VALUES		