

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY

(1) Terry Hall
Name

(2) 1415 Bayview Court
Address (number and street)
Fort Myers, FL 33901
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): City Council Ward 4
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 1 / 13 / 2007 To 2 / 1 / 2007 Report Type F3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____ , _____ , 00 . _____

Loans \$ _____ , _____ , 00 . _____

Total Monetary \$ _____ , _____ , 00 . _____

In-Kind \$ _____ , _____ , 00 . _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____ , _____ , 00 . _____

Transfers to Office Account \$ _____ , _____ , 00 . _____

Total Monetary \$ _____ , _____ , 00 . _____

(8) Other Distributions

\$ _____ , _____ , 00 . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 426 . 30

(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.

(Type name) Carolyn M. Hulette

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Carolyn M Hulette
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Terry Hall

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Terry Hall
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Terry Hall (2) I.D. Number _____

(3) Cover Period 1 / 13 / 2007 through 2 / 1 / 2007 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
		Type	Occupation	Type	Description		
/ /	NONE						00
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