

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

(1) Don S. Mitchell  
Name

(2) 1236 N Pine Hills Road  
Address (number and street)

\_\_\_\_\_  
City, State, Zip Code

**OFFICE USE ONLY**

2008 OCT -6 A 10:26  
SUPERVISOR OF ELECTIONS  
ORANGE COUNTY, FL

(3) ID Number: \_\_\_\_\_

CHECK IF ADDRESS HAS CHANGED

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(4) Check appropriate box(es):

Candidate (office sought): Clerk Of Courts

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

**(5) REPORT IDENTIFIERS**

Cover Period: From 09 / 13 / 2008 To 09 / 26 / 2008 Report Type G2

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 200.00

Loans \$ \_\_\_\_\_

Total Monetary \$ 200.00

In-Kind \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 102.10

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ 102.10

**(8) Other Distributions**

\$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ 10,954.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 10,713.34

**(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) Sherlyn Leonard

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X** [Signature]  
Signature

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

(Type name) Don S. Mitchell

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

**X** [Signature]  
Signature



