

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

(1) Edward L. Tobin
Name

(2) _____
Address (number and street)

City, State, Zip Code

OFFICE USE ONLY RECEIVED
2010 JUL 12 PM 3:36
CITY CLERK'S OFFICE

CHECK IF ADDRESS HAS CHANGED (3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): _____

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 4 1 1 10 To 6 1 30 10 Report Type Q2-10

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ 500.-

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ Ø

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions
\$ _____

(9) TOTAL Monetary Contributions To Date
\$ 500.-

(10) TOTAL Monetary Expenditures To Date
\$ Ø

(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) Edward L. Tobin

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X _____
Signature

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

(Type name) Edward L. Tobin

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

X _____
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Edward L. Topp

(2) I.D. Number _____

(3) Cover Period 4/1/10 through 6/30/10

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code.	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
6/20/10 5/28/10	Edward L. Topp		Atty	LOAN			\$500.-
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Edward L. Jones

(2) I.D. Number _____

(3) Cover Period 9, 1, 10 through 6, 30, 10

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
10	Ø	Ø	Ø	Ø	Ø
11					
11					
11					
11					
11					
11					
11					
11					