

9-21-00

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS

(1) HARRIET DAMESSEK (2) \_\_\_\_\_  
Candidate, Committee or Party Name I.D. Number

(3) 4 SAND POINT CIRCLE ORMOND BEACH FL 32174  
Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):  
 Candidate (office sought): COUNTY COUNCIL, DISTRICT 4 B  
 Political Committee  Check if PC has DISBANDED  
 Committee of Continuous Existence  Check if CCE has DISBANDED  
 Party Executive Committee

RECEIVED  
NO SEP 21 11:10:05  
VOLUNTEER CENTER

(5) REPORT IDENTIFIERS

Cover Period: From 09/01/00 To 09/08/00 Report Type 2

Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT  
Cash & Checks \$ 250.-  
Loans \$ \_\_\_\_\_  
Total Monetary \$ 250.-  
In-kind \$ \_\_\_\_\_

(7) EXPENDITURES THIS REPORT  
Monetary Expenditures \$ \_\_\_\_\_  
Transfers to Office Account \$ \_\_\_\_\_  
Total Monetary \$ \_\_\_\_\_  
(8) Other Distributions \$ \_\_\_\_\_

(9) TOTAL Monetary Contributions to Date  
\$ 10,785.99

(10) TOTAL Monetary Expenditures to Date  
\$ \_\_\_\_\_

(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  
HARRIET DAMESSEK  
Name of  Treasurer  Deputy Treasurer  
X HARRIET DAMESSEK  
Signature

I certify that I have examined this report and it is true, correct and complete  
HARRIET DAMESSEK  
Name of  Candidate  Chairman (PC/PTY Only)  
X HARRIET DAMESSEK  
Signature

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS

(1) HARRIET Damesek (2) \_\_\_\_\_  
 Candidate, Committee or Party Name I.D. Number

(3) 4 SAND POINT CIRCLE ORMOND BEACH FL 32174  
 Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):  
 Candidate (office sought): COUNTY COUNCIL, DISTRICT 4  
 Political Committee  Check if PC has DISBANDED  
 Committee of Continuous Existence  Check if CCE has DISBANDED  
 Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 08/12/00 To 08/31/00 Report Type F3

Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT  
 Cash & Checks \$ 3,165.99  
 Loans \$ \_\_\_\_\_  
 Total Monetary \$ 3,165.99  
 In-kind \$ \_\_\_\_\_

(7) EXPENDITURES THIS REPORT  
 Monetary Expenditures \$ \_\_\_\_\_  
 Transfers to Office Account \$ \_\_\_\_\_  
 Total Monetary \$ \_\_\_\_\_  
 (8) Other Distributions \$ \_\_\_\_\_

(9) TOTAL Monetary Contributions to Date  
 \$ 10,535.99

(10) TOTAL Monetary Expenditures to Date  
 \$ \_\_\_\_\_

(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  
HARRIET Damesek  
 Name of  Treasurer  Deputy Treasurer  
 HARRIET Damesek  
 Signature

I certify that I have examined this report and it is true, correct and complete  
HARRIET Damesek  
 Name of  Candidate  Chairman (PC/PTY Only)  
 HARRIET Damesek  
 Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name HARPLET DAMESEK

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 08, 12, 00 through 08, 31, 00

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
09/15/00	CARRIE A DAVIS 13712 PICARSA DR. JACKSONVILLE, FL 32225	I		CHE		DELETE	\$ 50.-
21							
11							
11							
11							
11							
11							
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11							