

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS

(1) SIDNEY E PITTMAN (2) NIA
 Candidate, Committee or Party Name I.D. Number

(3) 1057 Prescott Blvd Deltona, FL 32738
 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): WVHA Group A SEA # 3

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

RECEIVED
 DIVISION OF ELECTIONS
 APR 12 PM 1:35
 FLORIDA DEPARTMENT OF STATE

(5) REPORT IDENTIFIERS

Cover Period: From 07/29/00 To 08/11/00 Report Type F2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ -0-

Loans \$ -0-

Total Monetary \$ -0-

In-kind \$ -0-

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ -0-

Transfers to Office Account \$ -0-

Total Monetary \$ -0-

(8) Other Distributions \$ -0-

(9) TOTAL Monetary Contributions to Date
 \$ 50.00

(10) TOTAL Monetary Expenditures to Date
 \$ 43.00

(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 true, correct and complete

SIDNEY PITTMAN
 Name of Treasurer Deputy Treasurer

[Signature]
 Signature

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

SIDNEY PITTMAN
 Name of Candidate Chairman (PC/PTY Only)

[Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name SIDNEY PITTMAN

(2) I.D. Number _____

(3) Cover Period 07/29/00 through 08/11/00

(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				
<u>11</u>	<u>None</u>						
<u>11</u>							
<u>11</u>							
<u>11</u>							
<u>11</u>							
<u>11</u>							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SIDNEY PITTMAN

(2) I.D. Number _____

(3) Cover Period 07/29/00 through 08/11/00

(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
11	NONE				
11					
11					
11					
11					
11					