

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Shirley Green (2) I.D. Number _____
 (3) Cover Period 08/12/00 through 08/31/00 (4) Page 2 of 2

(5) Date	(6) Sequence Number	(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
8/30/00	9	Montgomery, Eleanor 6 Seabridge Dr. Ormond Bch, FL 32176	reimburse ad in senior newspaper	CHE		142. ⁰⁰
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