

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

(1) Andrew C. Ask (2) 941-547-1202  
Candidate, Committee or Party Name Telephone Number

(3) 5215 Del Prado Blvd, Cape Coral, FL 33904-9718  
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): Mayor Contra 07 Lee County

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

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(5) REPORT IDENTIFIERS

Cover Period: From 10/14/00 to 11/02/00 Report Type Original

Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ \_\_\_\_\_  
Loans \$ \_\_\_\_\_  
Total Monetary \$ \_\_\_\_\_  
In-kind \$ \_\_\_\_\_

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ \_\_\_\_\_  
Transfers to Office Account \$ \_\_\_\_\_  
Total Monetary \$ \_\_\_\_\_

(8) Other Distributions \$ \_\_\_\_\_

(9) TOTAL Monetary Contributions to Date  
\$ 244.00

(10) TOTAL Monetary Expenditures to Date  
\$ 210.15

(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

HARRY HALME

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

ANDREW C. ASK

Name of  Treasurer  Deputy Treasurer

X Harry Halme

Signature

Name of  Candidate  Chairman (PC/PTY Only)

X Andrew C. Ask

Signature

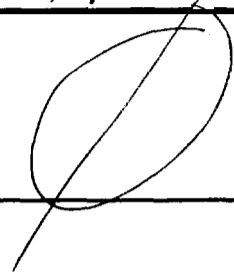
**CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name ANDREW C. ASF

(2) PHONE # 941-549-1202

(3) Cover Period 10/14/00 through 11/02/00

(4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contributio Type	(10) In-kind Description	(11) Amendmer	(12) Amount
			Type	Occupation				
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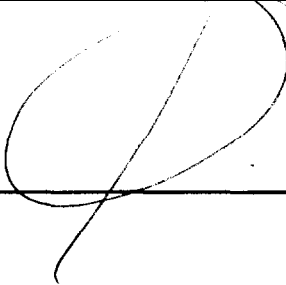
**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name ANDREW C ASK

(2) ID. Number 941-549-1202

(3) Cover Period 10/14/00 through 11/02/00

(4) Page 1 of 1

(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	Amount
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