

**Political Organization
 Report of Contributions and Expenditures**

OMB No 1545-1696

▶ See Separate Instructions.

A. For the period beginning 07/01/2005 and ending 12/31/2005

B. Check applicable boxes: Initial report Change of address Amended report Final report

1 Name of organization: We All Count, Inc. Employer identification number: 01-0609061

2 Mailing address (P.O. Box or number, street, and room or suite number):
426 E. 6th Avenue
 City or town, state, and ZIP code:
Tallahassee, FL 32303

3 E-mail address of organization: truth@weallcount.org 4 Date organization was formed: 3/7/02

5a Name of custodian of records: Barbara DeVane Gilberg 5b Custodian's address:
426 E. 6th Avenue
Tallahassee, Florida 32303

6a Name of contact person: Barbara DeVane-Gilberg 6b Contact person's address:
426 E. 6th Avenue
Tallahassee, Florida 32303

7 Business address of organization (if different from mailing address shown above) Number, street, and room or suite number:
426 E. 6th Avenue
 City or town, state, and ZIP code:
Tallahassee, Florida 32303

- 8 Type of report (check only one box)
- a First quarterly report (due by April 15)
 - b Second quarterly report (due by July 15)
 - c Third quarterly report (due by October 15)
 - d Year-end report (due by January 31)
 - e Mid-year report (Non-election year only-due by July 31)
 - f Monthly report for the month of _____ (due by the 20th day following the month shown above, except the December report, which is due by January 31)
 - g Pre-election report (due by the 12th or 15th day before the election)
 (1) Type of election: _____
 (2) Date of election: _____
 (3) For the state of: _____
 - h Post-general election report (due by the 30th day after general election)
 (1) Date of election: _____
 (2) For the state of: _____

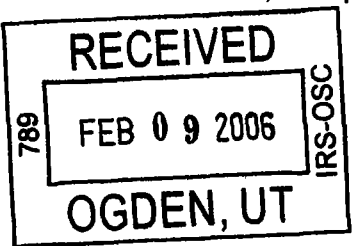
9 Total amount of reported contributions (total from all attached Schedules A)	9	\$8,050.00
10 Total amount of reported expenditures (total from all attached Schedules B)	10	\$8,050.00

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here

Barbara A. Gilberg
 Signature of authorized official

2-1-06
 Date



SCANNED FEB 14 2006

Schedule A Itemized Contributions		Schedule A page 1 of 1
Name of organization We All Count, Inc.		Employer identification number 01-0609061
Contributor's name, mailing address and ZIP code SEARCY, DENNEY, SCAROLA, BARNHART, & SHIPLEY 2139 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	Name of contributor's employer	Amount of contribution
	Contributor's occupation LAW FIRM	\$ 1,150.00
	Aggregate contributions year-to-date ▶ \$ 8,050.00	Date of contribution 07/28/2005
Contributor's name, mailing address and ZIP code SEARCY, DENNEY, SCAROLA, BARNHART, & SHIPLEY 2139 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	Name of contributor's employer	Amount of contribution
	Contributor's occupation LAW FIRM	\$ 1,050.00
	Aggregate contributions year-to-date ▶ \$ 8,050.00	Date of contribution 08/10/2005
Contributor's name, mailing address and ZIP code SEARCY, DENNEY, SCAROLA, BARNHART, & SHIPLEY 2139 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	Name of contributor's employer	Amount of contribution
	Contributor's occupation LAW FIRM	\$ 3,440.00
	Aggregate contributions year-to-date ▶ \$ 8,050.00	Date of contribution 08/10/2005
Contributor's name, mailing address and ZIP code SEARCY, DENNEY, SCAROLA, BARNHART, & SHIPLEY 2139 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	Name of contributor's employer	Amount of contribution
	Contributor's occupation LAW FIRM	\$ 630.00
	Aggregate contributions year-to-date ▶ \$ 8,050.00	Date of contribution 09/16/2005
Contributor's name, mailing address and ZIP code SEARCY, DENNEY, SCAROLA, BARNHART, & SHIPLEY 2139 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	Name of contributor's employer	Amount of contribution
	Contributor's occupation LAW FIRM	\$ 630.00
	Aggregate contributions year-to-date ▶ \$ 8,050.00	Date of contribution 11/22/2005
Contributor's name, mailing address and ZIP code SEARCY, DENNEY, SCAROLA, BARNHART, & SHIPLEY 2139 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33409	Name of contributor's employer	Amount of contribution
	Contributor's occupation LAW FIRM	\$ 1,150.00
	Aggregate contributions year-to-date ▶ \$ 8,050.00	Date of contribution 12/20/2005
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Subtotal of contributions reported on this page only of Form 9972		Enter here and also include this amount in the total on line 9 ▶ \$ 8,050.00

Schedule B Itemized Expenditures Schedule B page 1 of 2

Name of organization: **We All Count, Inc.** Employer identification number: **01-0609061**

Recipient's name, mailing address and ZIP code CARR, RIGGS & INGRAM, LLC 1713 MAHAN DRIVE Tallahassee, FL 32308	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ 1,150.00 Date of expenditure 07/28/2005

Purpose of expenditure

ACCOUNTING

Recipient's name, mailing address and ZIP code CARR, RIGGS & INGRAM, LLC 1713 MAHAN DRIVE Tallahassee, FL 32308	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ 3,230.00 Date of expenditure 08/10/2005

Purpose of expenditure

ACCOUNTING

Recipient's name, mailing address and ZIP code CARR, RIGGS & INGRAM, LLC 1713 MAHAN DRIVE Tallahassee, FL 32308	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ 1,150.00 Date of expenditure 12/20/2005

Purpose of expenditure

ACCOUNTING

Recipient's name, mailing address and ZIP code FLORIDA DEPARTMENT OF STATE PO Box 6327 Tallahassee, FL 32314	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ 1,050.00 Date of expenditure 08/16/2005

Purpose of expenditure

CORPORATION FEES

Recipient's name, mailing address and ZIP code MEYER & BROOKS P O BOX 1547 TALLAHASSEE, FL 32302	Name of recipient's employer	Amount of expenditure
	Recipient's occupation LAW FIRM	\$ 630.00 Date of expenditure 08/10/2005

Purpose of expenditure

LEGAL

Recipient's name, mailing address and ZIP code MEYER & BROOKS P O BOX 1547 TALLAHASSEE, FL 32302	Name of recipient's employer	Amount of expenditure
	Recipient's occupation LAW FIRM	\$ 210.00 Date of expenditure 08/10/2005

Purpose of expenditure

LEGAL

Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 9972 ▶ \$ **7,420.00**

Schedule B Itemized Expenditures Schedule B page 2 of 2

Name of organization: **We All Count, Inc.** Employer identification number: **01-0609061**

Recipient's name, mailing address and ZIP code MEYER & BROOKS P O BOX 1547 TALLAHASSEE, FL 32302	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
	LAW FIRM	\$ 630.00 11/22/2005

Purpose of expenditure
LEGAL

	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
		\$

Purpose of expenditure

	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
		\$

Purpose of expenditure

	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
		\$

Purpose of expenditure

	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
		\$

Purpose of expenditure

	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	Date of expenditure
		\$

Purpose of expenditure

Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 9972 \$ **630.00**