FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Bonnie Lano Rippingille Name	OFFICE USE ONLY 381						
(2) P.M. Box 223, 5783 SW 40th Street, Miami	FL 83155						
Address (number and street)	<u> </u>						
City, State, Zip Code							
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es):  X Candidate (office sought): County Court J	udge Group 40						
☐ Political Committee [	CHECK IF PC HAS DISBANDED						
☐ Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED						
☐ Party Executive Committee							
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED						
(5) REPORT	IDENTIFIERS						
Cover Period: From	7/28/2006 / Report Type F1-J0						
☐ Original	Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$0.00	Monetary Expenditures \$ -4,853.00						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total Monetary \$ -4,853.00						
In-Kind \$							
	(8) Other Distributions						
	\$						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$257,440.00	\$257,315.35_						
(44) 0507	IFICATION						
(11) CERT It is a first degree misdemeanor for any pers							
I certify that I have examined this report and it is true, correct, and complete.  I certify that I have examined this report and it is true, correct, and complete.							
(Type name) (Type name)							
Individual (only for election eering commun.)	Chairperson (only for PC, PTY & electioneering commun. organization)						
X	X						
Signature	Signature						

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

(1) Name	Bonnie Lano Ripping	ille		z) I.D. Numbe	ar3	881
	4/1/2006		7/28/2006			
(3) Cover Perio	od///	through	1 1	(4) Pag	e <sup>1</sup>	of <sup>0</sup>
1-7					W	
/E\	(7)	(0)	(0)	(10)	(11)	(12)
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor		In-kind		
Number	City, State, Zip Code	Type Occupa	ation Type	Description	Amendment	Amount
	10 A	2/ 2/ 2/	2 00.2			
1 1	-					
1 1						
1 1						
1						
1						
1 1						
1 1						
1 1						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _B	onnie	Lano R	ippin	gille			 (2) I.D. Num	nber	3	381	arv.
		4/1/20	06		7/28/20	006	~ ~				
(3) Cover Pe	eriod	1	1	through_	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
5/9/2006	County Elections Dept., Miami-Dade 2700 NW 87th Avenue Miami, Fl 33126	group 40 filing fee	МО	Delete	\$4,853.00
5/9/2006	County Elections Dept., Miami-Dade 2700 NW 87th Avenue Miami, Fl 33126	duplicate entry- delete	МО	Add	\$0.00
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DS-DE 14 (Rev					