

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

(1) Bonnie Lano Rippingille
Name

(2) P.M. Box 223, 5783 SW 40th Street, Miami, FL 33155
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): County Court Judge 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 8/12/2006 To 8/31/2006 / Report Type F3-06

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 100.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 100.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 81,690.00

(10) TOTAL Monetary Expenditures To Date

\$ 128,595.34

(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.

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(Type name)

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

(Type name)

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Bonnie Lano Rippingille (2) I.D. Number 381

8/12/2006 through 8/31/2006

(3) Cover Period / / through / / (4) Page 1 of 0

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

(1) Name Bonnie Lano Ripplingille

(2) I.D. Number 381

(3) Cover Period 8/12/2006 through 8/31/2006

(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
(6) Sequence Number					
8/25/2006 / /	Ripplingille, Bonnie L. 5783 S.W. 40th Street PMB 223 Miami, Fl 33155	reimburse ment	PS	Delete	\$100.00
1					
8/25/2006 / /	Ripplingille, Bonnie L. 5783 S.W. 40th Street PMB 223 Miami, Fl 33155	envelopes& stamps reimb.	MO	Add	\$100.00
2					
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