FLORIDA DEPARTMENT OF STA	ATE DIVISION OF ELECTIONS R'S REPORT SUMMARY
(1) David Goodrich Name	OFFICE USE ONLY 43
Photographical (1969)	dock, Fl 33938-0847, Port Charlotte, Fl 33948
City, State, Zip Code	
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:
(4) Check appropriate box(es):  X Candidate (office sought): County Commiss 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 7/28/2006
Cover Period: From/	Report Type F1
☐ Original	Report Independent Expenditure Report
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT
Cash & Checks \$0.00	Monetary Expenditures \$ 128.00
Loans \$	Transfers to Office Account \$ 0.00
Total Monetary \$	Total Monetary \$ 128.00
In-Kind \$	
	(8) Other Distributions \$0.00
(9) TOTAL Monetary Contributions To Date \$800.00_	(10) TOTAL Monetary Expenditures To Date \$672.08_
	IFICATION
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.)  Treasurer Deputy Treasurer	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
Signature	Signature

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

(1) Name	David Goodrich	(2) I.D. Number						
	7/1/2006			/28/2006				
(3) Cover Perio	od///	thro	ough	! !	(4) Page	1	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Co	pntributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
I I								
1 1								
1 1								
1 1								
1 1								
1 1								
J I								
1 1								

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

(1) Name	David	Goodric	h				 (2) I.D. Num	nber	4	13	arv.
		7/1/20	06		7/28/20	006		No.			
(3) Cover Po	eriod	I	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
7/7/2006	Election Office, Taylor Rd. Punta Gorda, FL 33050	petions	DI	Delete	\$128.00
1					
8/8/2006	Election Office, Taylor Rd. Punta Gorda, FL 33050	petions	МО	Add	\$128.00
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