

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

(1) CHARLIE WHITEHEAD  
Name

(2) 20 EMILY LN, FORT MYERS BEACH, FL 33931  
Address (number and street)

\_\_\_\_\_  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

**OFFICE USE ONLY** 327

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate (office sought): COUNTY COMMISSIONER-3
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 8/10/2012 To 9/14/2012 / \_\_\_\_\_ Report Type G1

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>800.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>800.00</u>
In-Kind	\$	<u>0.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

**(8) Other Distributions**  
\$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
\$ 5,400.00

**(10) TOTAL Monetary Expenditures To Date**  
\$ 4,400.65

**(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.

(Type name) \_\_\_\_\_  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer  
**X** \_\_\_\_\_  
 Signature

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

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)  
**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** CHARLIE WHITEHEAD **(2) I.D. Number** 327  
**(3) Cover Period** 8/10/2012 through 9/14/2012 **(4) Page** 1 of 1

(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
8/25/2012 / /	Veaux, Carl 3705 SE 3rd Place Cape Coral, fl 33904	I		CH			\$100.00
1							
8/29/2012 / /	Dequaine, Lester 3140 Sundance Circle Naples, fl 34109	I	retired	CH			\$500.00
2							
9/13/2012 / /	Lubner, Clive 14201 Farragut Court Fort Myers, fl 33908	I	ceo	CH			\$200.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CHARLIE WHITEHEAD

(2) I.D. Number 327

(3) Cover Period 8/10/2012 through 9/14/2012

(4) Page 1 of 0

(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					
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