FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) John Paul Bailey	OFFICE USE ONLY 131						
Name							
(2) , Tallahassee, FL 32303							
Address (number and street)							
City, State, Zip Code							
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es):  X Candidate (office sought): Leon County	mmission - District 3						
☐ 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						
	DENTIFIERS						
Cover Period: From	8/11/2006 / Report Type 06-F2						
☐ Original     Amendment   ☐ Special Election	Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$	Monetary Expenditures \$ -5.90						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total Monetary \$ -5.90						
In-Kind \$	The state of the s						
	(8) Other Distributions \$ 0.00						
	* -						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$ 17,375.00	\$15,103.61_						
(11) CERT	IFICATION						
It is a first degree misdemeanor for any pers	on 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.  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.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)						
X	X						
Signature	Signature						

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

(1) Name	John Paul Bailey			Z) I.D. Numbe	er1	.31
	7/29/2006		8/11/2006			
(3) Cover Peri	od / /	through	_	(4) Pag	je	of $\frac{1}{}$
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(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation		Description	Amendment	Amount
8/5/2006	Bailey, John Paul	I	IK	food	Add	\$5.9
I I	Tallahassee, Fl 32301					
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	John	Paul	Bail	.ey			, , , , , , , , , , , , , , , , , , ,	 (2) I.D. Nun	nber	1	131	301
		7/2	9/20	06		8/11/	2006					
(3) Cover Po	eriod		I	1	through	1	1	 (4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
8/5/2006	Firehouse Subs, 1420 Capital Cir NW Tallahassee, Fl 32303	food	MO	Delete	\$5.90
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DS-DE 14 (Rev	00(02)				