

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

(1) John D. C. Newton, II  
Name

(2) 629 Ingleside Avenue, Tallahassee, FL 32303  
Address (number and street)

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

CHECK IF ADDRESS HAS CHANGED

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

(4) Check appropriate box(es):

Candidate (office sought): Leon County Judge - Seat 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

**(5) REPORT IDENTIFIERS**

Cover Period: From 7/29/2006 To 8/11/2006 / \_\_\_\_\_ Report Type 06-F2

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      \$      0.00

Transfers to Office Account      \$      0.00

Total Monetary      \$      0.00

(8) Other Distributions  
\$      0.00

**(9) TOTAL Monetary Contributions To Date**

\$      81,891.62

**(10) TOTAL Monetary Expenditures To Date**

\$      64,256.00

**(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 John D. C. Newton, II (2) I.D. Number 77

7/29/2006 through 8/11/2006

(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 John D. C. Newton, II

(2) I.D. Number 77

(3) Cover Period 7/29/2006 through 8/11/2006

(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					
8/3/2006 //	Shingles, Cynthia 1403 Daniels Street Tallahassee, FL 32310	administr ative assistance	MO	Delete	\$100.00
1					
8/3/2006 //	Shingles, Cynthia 1009 Wakulla Springs Road Crawfordville, FL 32327	administr ative assistance	MO	Add	\$100.00
2					
8/3/2006 //	Shingles, Cynthia 1403 Daniels Street Tallahassee, FL 32310	gas expense	MO	Delete	\$25.00
3					
8/3/2006 //	Shingles, Cynthia 1009 Wakulla Springs Road Crawfordville, FL 32327	gas expense	MO	Add	\$25.00
4					
8/9/2006 //	Shingles, Cynthia 1403 Daniels Street Tallahassee, FL 32310	administr ative assistance	MO	Delete	\$100.00
5					
8/9/2006 //	Shingles, Cynthia 1009 Wakulla Springs Road Crawfordville, FL 32327	administr ative assistance	MO	Add	\$100.00
6					
8/9/2006 //	Shingles, Cynthia 1403 Daniels Street Tallahassee, FL 32310	gas	MO	Delete	\$25.00
7					
8/9/2006 //	Shingles, Cynthia 1009 Wakulla Springs Road Crawfordville, FL 32327	gas	MO	Add	\$25.00
8					