

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

(1) Gabriel Johnson  
Name

(2) 2863 South Lake Bradford Road, Tallahassee, FL 32310  
Address (number and street)

City, State, Zip Code

**OFFICE USE ONLY** 85

CHECK IF ADDRESS HAS CHANGED

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

(4) Check appropriate box(es):

Candidate (office sought): Ochlockonee R. S. & W. Conservation District 2

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 7/1/2006 To 7/28/2006 Report Type 06-F1

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**

\$ 625.00

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

\$ 398.00

**(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 Gabriel Johnson (2) I.D. Number 85

7/1/2006 through 7/28/2006

(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 Gabriel Johnson

(2) I.D. Number 85

(3) Cover Period 7/1/2006 through 7/28/2006

(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					
7/17/2006 //	Papa, Johns Pizza Tennessee St Tallahassee, fl 32310	pizza at meeting	MO	Delete	\$26.00
1					
7/17/2006 //	Papa, Johns Pizza 1472 Tennessee St w Tallahassee, fl 32310	pizza at meeting	MO	Add	\$26.00
2					
7/9/2006 //	Papa, Johns Pizza Tennessee St Tallahasee, Fl 32310	pizza at meeting	MO	Delete	\$27.00
3					
7/9/2006 //	Papa, Johns Pizza 1472 Tennessee St w Tallahasee, Fl 32310	pizza at meeting	MO	Add	\$27.00
4					
//					
//					
//					
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