FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Leon County Democratic Executive Commi	office use only 93						
Name							
(2) P O Box 1751, Tallahassee, FL 32302  Address (number and street)							
Address (Humber and Street)							
City, State, Zip Code							
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es):							
☐ Candidate (office sought):  ☐ 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	6/30/2006 / Report Type 06-Q2						
☐ Original ☐ Amendment ☐ Special Election	n Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$0.00	Monetary Expenditures \$ -3,000.00						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total Monetary \$ -3,000.00						
In-Kind \$							
	(8) Other Distributions \$ 0.00						
(9) TOTAL Monetary Contributions To Date \$ 31,047,11	(10) TOTAL Monetary Expenditures To Date \$						
31,047.11	20,463.11						
	TIFICATION						
	son 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 Treasurer Deputy Treasurer electioneering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)						
X	X						
Signature	Signature						

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

(1) Name	Leon County Democr			z) I.D. Numbe	<b>:</b> I"9	13
	4/1/2006		6/30/2006		1	. 0
(3) Cover Perio	od / /	through	. / /	(4) Pag	e 1	of
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1				·		
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1 1						
1 1						
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1 1						
1 1						
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Leon	County	Democ	ratic	Executiv	e Com	mittee	(2	) I.D. Num	ber	Ş	13	
		4/1/20	06		6/3	0/200	6	· · · · · · ·	_				
(3) Cover Per	riod	1	1	thro	ugh	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
6/13/2006	WTXL, Hwy 319 Tallahassee, FL 32308	tv ad	МО	Delete	\$3,000.00
8/29/2006	WTXL, Hwy 319 Tallahassee, FL 32308	expenditu re not made	МО	Add	\$0.00
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