

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

(1) Preserve our Key Biscayne (POKB)
Name

(2) P.O. Box 1034
Address (number and street)

Key Biscayne, FL 33149
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(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**

OFFICE USE ONLY

ONLINE SUBMISSION
[1017572]

Submitted on:
4/10/2010 16:36:23 (eastern)

(3) ID Number: 708

(5) REPORT IDENTIFIERS

Cover Period: From 1/1/2010 To 3/31/2010 Report Type Q1-10

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 \$ 60.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 60.00

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 5,538.14

(10) TOTAL Monetary Expenditures To Date

\$ 5,031.14

(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 Preserve our Key Biscayne (POKB) (2) I.D. Number 708

1/1/2010 3/31/2010

(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 Preserve our Key Biscayne (POKB)

(2) I.D. Number 708

1/1/2010 through 3/31/2010

(3) Cover Period / / through / /

(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					
1/31/2010 //	Northern Trust Bank, 328 Crandon Boulevard suite 101 Key Biscayne, fl 33149	service charge	MO		\$20.00
1					
2/28/2010 //	Northern Trust bank, 328 Crandon Boulevard suite 101 Key Biscayne, FL 33149	service charge	MO		\$20.00
2					
3/31/2010 //	Northern Trust Bank, 328 Crandon Boulevard suite 101 Key Biscayne, FL 33149	service charge	MO		\$20.00
3					
//					
//					
//					
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