

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

RECEIVED
 2006 OCT 19 PM 12:53
 OFFICE USE ONLY
 MIAMI Dade COUNTY
 ELECTIONS DEPARTMENT

(1) High Pines Annexation Committee
 Name
c/o Keith Donner 7525 SW 54th Ct
 Address (number and street)
Miami, FL 33143-0000
 City, State, Zip Code

Check box if address has changed

(3) I.D. Number: 00000

(4) Check appropriate box(es):

- | | |
|--|---|
| <input type="checkbox"/> Candidate (office sought): _____ | <input type="checkbox"/> Check if PC has DISBANDED |
| <input checked="" type="checkbox"/> Political Committee | <input type="checkbox"/> Check if CCE has DISBANDED |
| <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check if no other electioneering communication reports will be filed |
| <input type="checkbox"/> Party Executive Committee | |
| <input type="checkbox"/> Electioneering Communication | |

(5) REPORT IDENTIFIERS

Cover Period: From 09/30/2006 To 10/13/2006 Report Type: G3
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	<u>\$0.00</u>
Loans	<u>\$0.00</u>
Total Monetary	<u>\$0.00</u>
In-Kind	<u>\$0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	<u>\$12.00</u>
Transfers to Office Account	<u>\$0.00</u>
Total Monetary	<u>\$12.00</u>
(8) Other Distributions	<u>\$0.00</u>

(9) TOTAL Monetary Contributions to Date

\$36,585.00

(10) TOTAL Monetary Expenditures to Date

\$15,499.46

(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

Keith Donner

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X 
 Signature

I certify that I have examined this report and it is true, correct and complete

Keith Donner

Candidate Chairman (only for PC, PTY & electioneering commun. organization)

X 
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name High Pines Annexation Committee (2) I.D. Number 00000

(3) Cover Period 09/30/2006 - 10/13/2006 (4) Page 0 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
	Nothing to report on this form						

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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name High Pines Annexation Committee (2) I.D. Number 00000
 (3) Cover Period 09/30/2006 - 10/13/2006 (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					
09/30/2006	Bristol Bank 1493 Sunset Dr Coral Gables, FL 33143-0000	Bank fees	MON		\$ 12.00
000001					

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