

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

**FILE COPY**

OFFICE USE ONLY

(1) LINC PAC  
 Name  
 (2) 9400 S Dadeland Blvd Suite 110  
 Address (number and street)  
Miami, FL 33156-0000  
 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 01/01/2006 To 03/31/2006 Report Type: Q1  
 Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	<u>\$200.00</u>
Loans	<u>\$0.00</u>
Total Monetary	<u>\$200.00</u>
In-Kind	<u>\$0.00</u>

(7) EXPENDITURES THIS REPORT

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

(9) TOTAL Monetary Contributions to Date

\$1,728.85

(10) TOTAL Monetary Expenditures to Date

\$1,177.21

(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

McHenry Hamilton

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

Beverly Gerald

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

**X**

Signature

# CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name LINC PAC

(2) I.D. Number 00000

(3) Cover Period 01/01/2006 - 03/31/2006

(4) Page 1 of 1

(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
		Type	Occupation				
02/06/2006	Cosgrove, John 8230 SW 192 Street Cutler Bay, FL 33157-0000	I	Mayor of Cutler Bay	CHE		ADD	\$ 200.00
000001							

