

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

(1) Nicole Deg  
Name

(2) 7921 Chadwick Dr, New Port Richey, FL 34654  
Address (number and street)

\_\_\_\_\_  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

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

(4) Check appropriate box(es):

Candidate (office sought): County Commissioner District 4

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 4/1/2006 To 6/30/2006 Report Type Q2-06

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 4,600.00

Loans \$ 0.00

Total Monetary \$ 4,600.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 4,600.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 4,600.00

(8) Other Distributions \$ 0.00

**(9) TOTAL Monetary Contributions To Date**

\$ 5,235.00

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

\$ 4,856.87

**(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.

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

(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 Nicole Deg (2) I.D. Number 55  
 4/1/2006 through 6/30/2006  
 (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) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
5/18/2006 / /	Deg, Nicole PO Box 1681 Elfers, FL 34668	I	stay at home mom	CA		Add	\$4,600.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Nicole Deg

(2) I.D. Number 55

(3) Cover Period 4/1/2006 through 6/30/2006

(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					
5/31/2006 //	Deg, Nicole PO Box 1681 Elfers, FL 34668	pay back to candidate	MO	Add	\$4,600.00
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