

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

(1) Christie Zimmer  
Name

(2) PO Box 2144, Land O' Lakes, FL 34639  
Address (number and street)

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

CHECK IF ADDRESS HAS CHANGED

**OFFICE USE ONLY** 84

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

**(4) Check appropriate box(es):**

Candidate (office sought): County Commissioner District 2

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 7/29/2006 To 8/11/2006 / \_\_\_\_\_ Report Type P2-06

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>-674.95</u>
Total Monetary	\$	<u>-674.95</u>
In-Kind	\$	<u>1,674.95</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  
\$ 0.00

(9) TOTAL Monetary Contributions To Date  
\$ 13,870.00

(10) TOTAL Monetary Expenditures To Date  
\$ 10,716.83

**(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.

(Type name) \_\_\_\_\_  
 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.

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

**X** \_\_\_\_\_  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** Christie Zimmer **(2) I.D. Number** 84  
**(3) Cover Period** 7/29/2006 through 8/11/2006 **(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
(6) Sequence Number						
8/10/2006 / /	WRIGHT, HARRY W 23032 GENEVA ROAD LAND O\ 'LAKES, FL 34639	I restaurant owner	IK	fund-rais food for er	Add	\$500.00
1						
8/10/2006 / /	HOLLOWAY, JOEY EHREN CUTOFF LAND O\ 'LAKES, FL 34639	I retailer	IK	use of fund-rais land for er	Add	\$500.00
2						
8/2/2006 / /	ZIMMER, CHRISTIE J P O BOX 2144 LAND O, FL 34639	I candidate	LO	postage	Delete	\$156.00
3						
8/2/2006 / /	ZIMMER, CHRISTIE J P O BOX 2144 LAND O, FL 34639	I candidate	IK	postage	Add	\$156.00
4						
7/30/2006 / /	ZIMMER, CHRISTIE J P O BOX 2144 LAND O, FL 34639	I candidate	LO	printing	Delete	\$518.95
5						
7/30/2006 / /	ZIMMER, CHRISTIE J P O BOX 2144 LAND O, FL 34639	I candidate	IK	printing	Add	\$518.95
6						
/ /						
/ /						

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Christie Zimmer

(2) I.D. Number 84

(3) Cover Period 7/29/2006 through 8/11/2006

(4) Page 1 of 0

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					