

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

(1) Democratic Club of PSL
Name
(2) PO Box 9137
Address (number and street)
Port St. Lucie, FL 34985
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1020725]
Submitted on:
8/19/2010 11:44:33 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 8

(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

(5) REPORT IDENTIFIERS

Cover Period: From 7/31/2010 To 8/19/2010 / Report Type F3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 100.00

Loans \$ 0.00

Total Monetary \$ 100.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 41,344.96

(10) TOTAL Monetary Expenditures To Date
\$ 43,911.07

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p>X _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Democratic Club of PSL (2) I.D. Number 8
 7/31/2010 through 8/19/2010
 (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) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
8/5/2010 / /	Hensley, Carl 117 NE Surfside Ave Pt St Lucie, FL 34983	I		CH			\$50.00
1							
8/5/2010 / /	Johnson, Stacy 8405 S Indian River Dr Ft Pierce, FL 34982	I		CH			\$10.00
2							
8/5/2010 / /	Hilson, Carol 1920 SE Redwing Cir Pt st lucie, FL 23952	I		CA			\$20.00
3							
8/5/2010 / /	Pelletier, Rita 588 NW Lambrusco Dr Pt St Lucie, FL 34986	I		CA			\$10.00
4							
8/5/2010 / /	Marshall, Gene 691 SE Ron Rico Ter Pt St Lucie, FL 34983	I		CA			\$5.00
5							
8/5/2010 / /	Venezia, Freddie 174 SW Andover Ct Pt St Lucie, FL 34953	I		CA			\$5.00
6							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Democratic Club of PSL

(2) I.D. Number 8

(3) Cover Period 7/31/2010 through 8/19/2010

(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					
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