

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

(1) Sandy June Krischke  
**Name**  
 (2) 8407 Fort Walton Avenue  
**Address (number and street)**  
Fort Pierce, FL 34951  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1026150]  
 Submitted on:  
 12/8/2010 10:36:57 (eastern)

**CHECK IF ADDRESS HAS CHANGED** (3) ID Number: 143

(4) **Check appropriate box(es):**  
 Candidate (office sought): School Board, District 1  
 Political Committee  **CHECK IF PC HAS DISBANDED**  
 Committee of Continuous Existence  **CHECK IF CCE HAS DISBANDED**  
 Party Executive Committee  **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**  
 Electioneering Communication

**(5) REPORT IDENTIFIERS**

Cover Period: From 8/20/2010 To 11/19/2010 Report Type TR  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 250.00  
 Loans \$ 0.00  
 Total Monetary \$ 250.00  
 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**  
 \$ 4,851.27

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 4,851.64

**(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><b>X</b> _____</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 &amp; electioneering commun. organization)</p> <p><b>X</b> _____</p> <p>Signature</p>
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Sandy June Krischke (2) I.D. Number 143

8/20/2010 through 11/19/2010

(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		
8/30/2010 / /	City of Port St. Lucie, 121 Port St. Lucie Bld. Bldg. B Port St. Lucie, Fl 34984	B	city permit/lic ense dept	RE			\$250.00
1							
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### CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sandy June Krischke

(2) I.D. Number 143

8/20/2010 11/19/2010

(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) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
9/3/2010 / /	Preganancy Care Center, 1119 Delaware Avenue Fort Pierce, FL 34950	final distribution	DI		\$225.28
1					
10/8/2010 / /	SLC Republican Exec. Comm., 6835 S. US Hwy. 1 Port St. Lucie, FL 34985	final distribution	DI		\$200.00
2					
11/19/2010 / /	Dogs & Cats Forever, 1762 Bayshore Blvd Port St. Lucie, FL	final distribution	DI		\$200.00
3					
/ /					
/ /					
/ /					
/ /					
/ /					