

SEP 21 '06 AM 10:52

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

(1) Democratic Retirees Club of St. Louis City
Name

(2) P.O. Box 12456
Address (number and street)

East Riverside, FL 34979
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): _____
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication

- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 09/01/06 To 09/15/06 Report Type G-1

- Original
- Amendment
- Special Election Report
- Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
\$ 9367.50

(10) TOTAL Monetary Expenditures To Date
\$ 8425.20

(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.

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(Type name) MARCO HEIKAN
 Individual (only for electioneering comm.) Treasurer Deputy Treasurer

(Type name) Ron Christine
 Candidate Chairperson (only for PC, PTY & electioneering comm. organization)

[Signature]
Signature

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Democratic Teachers Club of St Louis City

(2) I.D. Number _____

(3) Cover Period 09/01/06 through 09/15/06

(4) Page _____ of _____

(6) 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
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Democratic Retirees Club of St Louis City (2) I.D. Number _____

(3) Cover Period 09 1 16 106 through 10 1 06 106 (4) Page _____ of _____

(5) Date	(6) Sequence Number	(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				
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