

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

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

(2) P.O. Box 12856
Address (number and street)

Fort Pierce FL 34979
City, State, Zip Code

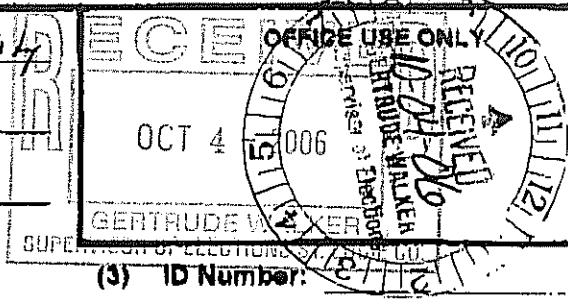
CHECK IF ADDRESS HAS CHANGED

(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



(3) ID Number: _____

(5) REPORT IDENTIFIERS

Cover Period: From 09/16/06 To 09/29/06 Report Type G2

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

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 100.00

Loans \$ _____

Total Monetary \$ 100.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 48.00

Transfers to Office Account \$ _____

Total Monetary \$ 48.00

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
\$ 9427.50

(10) TOTAL Monetary Expenditures To Date
\$ 8473.20

(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.

(Type name) MARCOLO JUAN
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

[Signature]
Signature

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

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

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 09 / 16 / 06 through 09 / 29 / 06 (4) Page _____ of _____

(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
1 / 1							
1 / 1							
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Democratic Business Club of St Louis City

(2) I.D. Number _____

(3) Cover Period 09/16/06 through 10/31/06

(4) Page _____ of _____

(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
(8) Sequence Number					
09/19/06 1	AMERICAN LEGION Post 318 8543 So US Highway #1 PSL, FL 34452	Lunch Mtg 6 lunches \$8.00 EA	MIDI		\$ 48.00
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES