FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) JOAN NELSON (2) JOAN NELSON Candidate, Committee or Party Name (3) 750 46TH ST. GULF 33050 MARATHON Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): ______MOSQUITO CONTROL BD. DIST. 2 Political Committee Check if PC has DISBANDED Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS From 7/1/2006 To 7/28/2006 Cover Period: Report Type: F1 🖊 Original Special Election Report Amendment Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary Cash & Checks Expenditures Transfers to Office 0.00 25.00 Loans Account 25.00 Total Monetary Total Monetary 0.00 0.00 In-Kind (8) Other Distributions (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 25.00 25.00 \$ (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 I certify that I have examined this report and it is true. true, correct and complete correct and complete Name of Candidate Chairman (PC/PTY only) Name of Treasurer Deputy Treasurer X Signature Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	JOAN	NELSON			(2)	I.D. Numb	er JOAN 1	TELSON
(3) Cover Period 7/1/2006 through		7/28/2006		(4)	Page	1 of	1	
(5) Date (6)	(7) Full Name (Last, Suffix, First,		Coi	(8) ntributor	(9)	(10)	(11)	(12)
Sequence Number	Street Address City, State, Zip		Туре	Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/21/2006	NELSON JOAN 750 46TH ST. GULF MARATHON, FL 33050		I		LOA			25.00
1								
DS-DE 13 (7/98	SEE	REVERSE F	OR IN	STRUCTIO	 NS AND CO	DE VALUES		

DS-DE 13 (7/98)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	JOAN	(2) I.D. NumberJOAN_NELSON					
(3) Cover Period	7/1/2006	through	7/28/2006	(4) Page	1	of _	1

	(7)	(8)	(9)	(10)	(11)
(5)			(9)	(10)	(11)
Date (6) Sequence	Full Name (Last, Suffix, First, Middle) Street Address &	Purpose (add office sought if contribution to a	Expenditure Type	Amendment	A
Number	City, State, Zip Code	candidate)	Туре	Amenament	
7/21/2006	SUPERVISOR OF ELECTIONS 490 63RD ST. OCEAN MARATHON, FL 33050	QUALIFYING FEE	MON		25.00
1					
DS-DE 14 (7/98	SEE REVERSE FOR 1	NSTRUCTIONS AND C	ODE VALUES		