

# WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

RICHARD F. RUDELL

Candidate's Name (Last, Suffix, First, Middle)  
OR Political Committee, CCE or Party Name

RICHARD RUDELL

Identification Number (Assigned by Division  
of Elections)

P.O. BOX 82

Address (Number and Street)

MOSQUITO CONTROL BD. DIST. 2

Office Sought (Include District, Circuit or  
Group Number)

KEY COLONY BEACH      FL      33051  
City                      State              Zip Code

- |                                               |                                                            |                                                                                                 |
|-----------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Candidate | <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> Check box if address has changed since last report.                    |
| <input type="checkbox"/> Political Committee  | <input type="checkbox"/> Party Executive Committee         | <input type="checkbox"/> Check here if PC or CCE has DISBANDED and will no longer file reports. |

## TYPE OF REPORT (Check Appropriate Box)

### QUARTERLY REPORTS

- January  
 April  
 July  
 October

### PRIMARY ELECTION

- 32nd day prior  
 18th day prior  
 4th day prior

### GENERAL ELECTION

- 46th day prior  
 32nd day prior  
 18th day prior  
 4th day prior

**TERMINATION REPORT**

**SPECIAL ELECTION**

## NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

7/29/2006

through

8/11/2006

**X**

Signature

Date

### SIGNATURES REQUIRED FOR:

#### Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (S. 106.07(5), F.S.)

#### Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (S. 106.07(5), F.S.)

#### Committees of Continuous Existence

Treasurer (S. 106.04(4)(c), F.S.)

#### Party Executive Committees

Treasurer or Chairman (S. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

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

**(1)** RICHARD F. RUDELL **(2)** RICHARD RUDELL  
Candidate, Committee or Party Name I.D. Number

**(3)** P.O. BOX 82 KEY COLONY BEACH FL 33051  
Address (number and street) City 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**

Cover Period: From 7/29/2006 To 8/11/2006 Report Type: F2

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00

Loans \$ 0.00

*Total Monetary* \$ 0.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 9.95

Transfers to Office Account \$ 0.00

*Total Monetary* \$ 9.95

**(8)** Other Distributions \$ 0.00

**(9) TOTAL Monetary Contributions to Date**

\$ 50.00

**(10) TOTAL Monetary Expenditures to Date**

\$ 34.95

**(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

Name of  Treasurer  Deputy Treasurer

**X**

Signature

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

Name of  Candidate  Chairman (PC/PTY only)

**X**

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name RICHARD F. RUDELL

(2) I.D. Number RICHARD RUDELL

(3) Cover Period 7/29/2006 through 8/11/2006

(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
7/31/2006	ORION BANK 5601 OVERSEAS HWY MARATHON, FL 33050	ACCOUNT CHARGES	MON	ADD	9.95
1					