FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) Mathson, Karen (2) mathson I.D. Number Candidate, Committee or Party Name 32413 (3) 166 Christopher Drive PCB Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): _____SCHOOL BOARD, DISTRICT 5 Political Committee Check if PC has DISBANDED Check if CCE has DISBANDED Committee of Continuous Existence Party Executive Committee (5) REPORT IDENTIFIERS From Open To Close Report Type: TR2 Cover Period: 🗸 Original Special Election Report Independent Expenditure Report Amendment (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary 318.50 548.19 Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 318.50 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 16,517.61 16,928.50 \$ (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 Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY only) X Signature Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Mathso	n, Kare	n		(2)	I.D. Numb	er <u>mat</u> l	nson
(3) Cover Perio	od 9/11/2002	_ through ₋		Close	(4)	Page	of	1
(5) Date (6)	(7) Full Name (Last, Suffix, First,	Middle)	Cor	(8) ntributor	(9)	(10)	(11)	(12)
Sequence Number	Street Address City, State, Zip (&	Туре	Occupation	Contribution Type	In-kind Description	Amendment	
10/10/2002	WMBB 613 Harrison Ave. PC, FL 32401		I	busine s	REF			318.50
1								
DS-DE 13 (7/98	SEE SEE	REVERSE F	OR IN	STRUCTIO	NS AND CO	DE VALUES		

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Maths	(2) I.D. Nu	on ———					
(3) Cover Period	9/11/2002	through	Close	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
9/25/2002	US Post Office 2319 S Hwy 77 Lynn Haven, FL 32444	thank you	MON		9.70
1					
9/28/2002	US Post Office 2319 S Hwy 77 Lynn Haven, FL 32444	thank you	MON		9.70
2					
9/30/2002	Bay Bank 509 Harrison Ave. PC, FL 32405	service charge	MON		7.72
3					
10/31/2002	Bay Bank 509 Harrison Ave PC, FL 32405	service charge	MON		5.74
4					
11/4/2002	AllTel Building 4, Second Floor One Allied Drive	telephone expense	MON		294.42
5	Little Rock, AR 72202-2099				
11/19/2002	Karen Mathson 166 Christopher Drive PCB, FL 32413	reimburse fuel expense	DIS		220.91
6					

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) Mathson, Karen (2) mathson I.D. Number Candidate, Committee or Party Name 32413 (3) 166 Christopher Drive PCB Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): _____SCHOOL BOARD, DISTRICT 5 Political Committee Check if PC has DISBANDED Check if CCE has DISBANDED Committee of Continuous Existence Party Executive Committee (5) REPORT IDENTIFIERS From Open To Close Report Type: TR2 Cover Period: Original Amendment Special Election Report Independent Expenditure Report (7) EXPENDITURES THIS REPORT (6) CONTRIBUTIONS THIS REPORT Monetary 1,259.08 318.50 Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 318.50 1,259.08 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 17,228.50 16,928.50 \$ (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 EXPENDITURES

(1) Name	Mathso	Mathson, Karen (2) I.				mathson			
(3) Cover Period	9/11/2002	through	Close	(4) Page	11	of	1		

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
9/6/2002	Supervisor of Elections 205 Mosley Drive Lynn Haven, Fl 32444	labels	MON	ADD	0.90
7					
9/6/2002	Talk 1430am 3100 E 15th St Springfield, Fl 32404	Advertising	MON	ADD	480.00
8					
9/6/2002	U.S. Post Office 2319 S Hwy 77 Lynn Haven, FL 32444	Postage	MON	ADD	45.21
9					
9/10/2002	Winn-Dixie 3157 W 23rd St Panama City, F 32405	election debriefing	MON	ADD	98.36
10					
9/10/2002	Publix 650 W 23rd St Panama City, FL 32405	election debriefing	MON	ADD	39.65
11					
9/10/2002	Party Universe 664 W 23rd St Panama City, FL 32405	election debriefing	MON	ADD	36.61
12					
9/10/2002	Publix 650 W 23rd St Panama City, FL 32405	election debriefing	MON	ADD	10.16
13					
	-				
DS-DE 14 (7/9	SEE REVERSE FOR	INSTRUCTIONS AND C	ODE VALUES		