#### FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) McKeithen, Frank I.D. Number Candidate, Committee or Party Name Panama City 32402 **(3)** P.O. Box 790 Address (number and street) Citv State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): \_\_\_\_\_\_ Check if PC has DISBANDED Political Committee Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS 8/27/2004 9/10/2004 Report Type: G1 Cover Period: To From 🖊 Original Special Election Report Amendment Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary 100.00 905.27 Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 100.00 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 110,645.06 115,493.86 \$ (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	McKeitl	nen, Fra	nk		(2)	I.D. Numb	er mckei	then
	od 8/27/2004						1 of	
(5) Date (6)	(7) Full Name (Last, Suffix, First,	Middle)	Сол	(8) ntributor	(9)	(10)	(11)	(12)
Sequence Number	Street Address City, State, Zip		Туре	Occupation	Contribution Type	In-kind Description	Amendment	Amount
9/10/2004	Smith Byron 4626 Schooner Lane Lynn Haven, FL 324		I	News Herald employ e	CAS	·		100.00
DS-DE 13 (7/98	SEF	E REVERSE F	OR IN	STRUCTIO	NS AND CO	DE VALUES		

DS-DE 13 (7/98)

### CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	McKeitl	nen, Frank	(2) I.D. Nur	nber	mckeithen			
(3) Cover Period	8/27/2004	through	9/10/2004	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
8/31/2004	Bay Graphics 1185 E. 15th St. Panama City, FL 32405	County Press advertisement	MON		200.00
1					
9/2/2004	Harris King 1212 Mississippi Ave. Lynn Haven, FL 32444	Gasoline expense	MON		224.95
2					
9/10/2004	Trustmark Bank 220 W. 19th St. Panama City, FL 32405	petty cash withdrawn	PCW		100.00
3					
9/10/2004	Signs Unlimited P.O. Box 1664 Panama City, FL 32401	vehicle signs for campaign	MON		280.13
4					
9/10/2004	Knology P.O. Box 830330 Birmingham, AL 32583	cable/internet-ca paign hdqtrs	MON		100.19
5					
DS-DE 14 (7/98	SEE REVERSE FOR	INSTRUCTIONS AND C	ODE VALUES		

#### FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) McKeithen, Frank I.D. Number Candidate, Committee or Party Name Panama City \_\_\_\_ 32402 **(3)** P.O. Box 790 Address (number and street) Citv State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): SHERIFF Check if PC has DISBANDED Political Committee Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS 8/27/2004 9/10/2004 Report Type: G1 Cover Period: To From Original Amendment Special Election Report Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary 910.27 Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 100.10 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 110,650.06 115,493.96 \$ (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	McKeithen,	Frank		(2)	I.D. Numb	er <u>mckei</u>	then
(3) Cover Period <u>8/27/2004</u> through _		ough9/	10/2004	(4)	Page	1 of	1
(5) Date (6)	(7) Full Name <b>(</b> Last, Suffix, First, Midd	lle) Co	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	In-kind Description	Amendment	Amount
8/28/2004	Trustmark Bank 220 W. 19th S t. Panama City, FL 32405	0		REF	Refund of check error (#2152)	ADD	0.10
 DS-DE 13 (7/98	SEE REV	ERSE FOR II	I NSTRUCTIO	NS AND CO	DE VALUES		

DS-DE 13 (7/98)

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	McKeithen, Frank			(2) I.D. Nu	mckeithen			
(3) Cover Period _	8/27/2004	through	9/10/2004	(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
8/28/2004	Terment Merchant Services 2030 Powers Ferry Road Atlanta, GA 30339	Credit card acceptance fee from bank	MON	ADD	5.00
6					
DS-DE 14 (7/98	SEE REVERSE FOR	INSTRUCTIONS AND C	ODE VALUES		