FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (2) risinger08 I.D. Number (1) Risinger, Connie Candidate, Committee or Party Name mexico Beach 32456 (3) 504 Maryland Blvd 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): _______MEXICO BEACH COUNCIL GROUP 4 Political Committee Check if PC has DISBANDED Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS From Open To Close Report Type: TM2 Cover Period: 🗸 Original Special Election Report Independent Expenditure Report Amendment (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 0.00 Total Monetary Total Monetary 120.00 0.00 In-Kind (8) Other Distributions (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 1,985.00 1,935.00 \$ (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. correct and complete true, 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	Risinger, Connie			(2) I.D. Number <u>risinger08</u>				
(3) Cover Peri	od <u>4/18/2008</u> through		Close	(4)	Page	of	1	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	Co	(8) ntributor	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	Description	Amendment	Amount	
6/30/2008	topcats printing shawna wood HC7 Box 982105 Mexico Beach, fl 32456	В	owner	INK	printed t-shirts		120.00	
DS-DE 13 (7/98	SEE REVERSE	FOR II	NSTRUCTIO	NS AND CO	DE VALUES			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Rising	(2) I.D. Nu	mber _	risinger08				
(3) Cover Period _	4/18/2008	through	Close	(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
5/30/2008	risinger connie 504 maryland blvd mexico beach, fl 32456	pay back loan	MON		675.2
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