

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY (cover sheet)

Modified For Lee County Only (09-2001)

SEE REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING ITEMS 1 THROUGH 11

(1) Thane R Beehler (2) 822-9477
 Candidate, Committee or Political Party Name Daytime Telephone Number

(3) 1555 Whiskey Cr Ft Myers FL 33701
 Address (Number and Street) City Zip Code

NOTE: Check box if address has changed since last report

(4) Check appropriate box or boxes below indicating reporting status:

Candidate (office sought and district or seat #) Hospital Board District 2

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee CHECK IF NO OTHER ELECTIONEERING

Electioneering Communication **COMMUNICATION REPORTS WILL BE FILED**

FINAL REPORT

(5) REPORT IDENTIFIERS (see reporting calendar or report reminder notice)

Reporting Period Covered: From 11 / 1 / 06 TO 11 / 22 / 06 Report Type Code: TR

Original Report Amended Report Special Election Report Independent Expenditure Report

(6) CONTRIBUTION FOR THIS REPORTING PERIOD

Cash and Checks \$ _____

Loans by Candidate \$ _____

TOTAL Monetary for Reporting Period \$ _____

In-kind Contributions
 (\$ _____)
 For this reporting period only.
 DO NOT add in-kind with monetary **AND** only list the amount for this reporting period.

(7) EXPENDITURES FOR THIS REPORTING PERIOD

Monetary Expenditures \$ 210.92

Transfers to Office Account \$ _____

TOTAL Monetary Expenditures for Reporting Period \$ 210.92

(8) Other Distributions (DOES NOT APPLY TO CANDIDATES)

(\$ _____)
 For this reporting period only.
DO NOT add to expenditures **AND** only list the amount for this reporting period. (See instructions)

(9) TOTAL Monetary Contributions TO DATE:

\$ 650
 Combine amount in (9) from last report on this line.

(10) TOTAL Monetary Expenditures TO DATE:

\$ 650
 Combine amount in (10) from last report on this line.

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, FS)

(SEE INSTRUCTIONS FOR SIGNATURE REQUIREMENTS)

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

Treasurer Deputy Treasurer Individual (only for Electioneering (Communication Organization or Independent Expenditure))

(SEE INSTRUCTIONS FOR SIGNATURE REQUIREMENTS)

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

Candidate Chairman (only for PC, PTY and Electioneering Communication Organization)

Darlene M. Beehler
 Signature

Thane R Beehler
 Signature

THIS FORM MUST BE SIGNED AS REQUIRED

(SEE INSTRUCTIONS FOR SIGNATURE REQUIREMENTS)

