

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) Clark Berry (2) 334-3035
 Candidate, Committee or Political Party Name Daytime Telephone Number
 (3) 1277 Hanton Ave. Fort Myers, FL 33901
 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 #) County Court Judge Group 8

- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

FINAL REPORT

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

Reporting Period Covered: From 7 129 106 TO 8 12 106 Report Type Code: TR
 Original Report Amended Report Special Election Report Independent Expenditure Report

(6) CONTRIBUTION FOR THIS REPORTING PERIOD

Cash and Checks \$ 381.60
 Loans by Candidate \$ -0-
 TOTAL Monetary for Reporting Period \$ 381.60

In-kind Contributions
 (\$ -0-)
 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 \$ 61085.98
 Transfers to Office Account \$ -0-
 TOTAL Monetary Expenditures for Reporting Period \$ 61085.98

(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:
 \$ 72381.60
 Combine amount in (9) from last report on this line.

(10) TOTAL Monetary Expenditures TO DATE:
 \$ 72381.60
 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)
 I certify that I 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)

X [Signature]
 Signature

X [Signature]
 Signature

THIS FORM MUST BE SIGNED AS REQUIRED

(SEE INSTRUCTIONS FOR SIGNATURE REQUIREMENTS)

