

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**

FINAL REPORT

(1) Mike Bice Candidate, Committee or Political Party Name (2) 239 849-9022 Daytime Telephone Number

(3) 11062 LAKELAND CIR Address (Number and Street) City LEE Zip Code 33913

**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 #) LMHS HOSPITAL BOARD DISTRICT 5

- |  |   |
|--|---|
| <input type="checkbox"/> Political Committee               | <input type="checkbox"/> CHECK IF PC HAS DISBANDED  |
| <input type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> CHECK IF CCE HAS DISBANDED   |
| <input type="checkbox"/> Patty Executive Committee         | <input type="checkbox"/> CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED |
| <input type="checkbox"/> Electioneering Communication      |   |

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

Reporting Period Covered: From 11 / 03 / 06 TO 12 / 15 / 06 Report Type Code: TR

Original Report  Amended Report  Special Election Report  Independent Expenditure Report

\*OFFERED 11/30/06 LEE CO FL

**(6) CONTRIBUTION FOR THIS REPORTING PERIOD**

Cash and Checks \$ 0.00

Loans by Candidate \$ \_\_\_\_\_

TOTAL Monetary for Reporting Period \$ 0.00

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 \$ 1,333.78

Transfers to Office Account \$ \_\_\_\_\_

TOTAL Monetary Expenditures for Reporting Period \$ 1,333.78

**(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:**

\$ 21,310.00

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

**(10) TOTAL Monetary Expenditures TO DATE:**

\$ 310.00

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)

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

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

**X**   
Signature

**X**   
Signature

**THIS FORM MUST BE SIGNED AS REQUIRED**  
(SEE INSTRUCTIONS FOR SIGNATURE REQUIREMENTS)



