

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Jonathan D. Cook Sr.
Name
7454 Wayland Blvd
Address (number and street)
Orlando, Fl. 32807
City, State, Zip Code

OFFICE USE ONLY

US-MP-24 (11-03)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: _____

(4) Check appropriate box(es): Orange County Mayor
 Candidate (office sought): _____
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 1 / 01 / 06 To 4 / 31 / 06 Report Type Q1
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

| | | |
|----------------|----|---------------|
| Cash & Checks | \$ | <u>165 00</u> |
| Loans | \$ | <u>0 00</u> |
| Total Monetary | \$ | <u>165 00</u> |
| In-Kind | \$ | <u>000 00</u> |

(7) EXPENDITURES THIS REPORT

| | | |
|-----------------------------|----|---------------|
| Monetary Expenditures | \$ | <u>156 24</u> |
| Transfers to Office Account | \$ | <u>000 00</u> |
| Total Monetary | \$ | <u>156 24</u> |

(8) Other Distributions

| | | |
|--|----|---------------|
| | \$ | <u>000 00</u> |
|--|----|---------------|

(9) TOTAL Monetary Contributions To Date
 \$ 490 00

(10) TOTAL Monetary Expenditures To Date
 \$ 379 07

(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 true, correct, and complete.

(Type name) Jonathan D. Cook Sr.
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Jonathan D. Cook Sr.
 Signature

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

(Type name) Jonathan D. Cook Sr.
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Jonathan D. Cook Sr.
 Signature