

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

(1) Bruce William Birkrem  
**Name**

(2) 721 Malone Drive  
**Address (number and street)**

Orlando, FL 32810  
**City, State, Zip Code**

CHECK IF ADDRESS HAS CHANGED

**OFFICE USE ONLY**

SEP 15 2 31 PM '08

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate (office sought): Orange County Commissioner Dist. 2

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 08 / 20 / 2010 To 09 / 10 / 2010 Report Type F1

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ \_\_\_\_\_ 0.00

Loans    \$ \_\_\_\_\_ 0.00

Total Monetary    \$ \_\_\_\_\_ 0.00

In-Kind    \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ \_\_\_\_\_ 0.00

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

Total Monetary    \$ \_\_\_\_\_ 0.00

(8) Other Distributions    \$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ 4895.00

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ 4070.50

**(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.

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(Type name) Bruce W. Birkrem  
 Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

(Type name) Bruce W. Birkrem  
 Candidate     Chairperson (only for PC, PTY & electioneering commun. organization)

X Bruce W. Birkrem  
Signature

X Bruce W. Birkrem  
Signature