

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

**(1)** BILL SHAW **(2)** BILL SHAW  
Candidate, Committee or Party Name I.D. Number

**(3)** P.O. Box 523107 Key West FL 33052  
Address (number and street) City State Zip Code

Check box if address has changed since last report

**(4)** Check appropriate box(es):

Candidate (office sought): MOSQUITO CONTROL BD. DIST. 4

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

**(5) REPORT IDENTIFIERS**

Cover Period: From 4/1/2004 To 6/30/2004 Report Type: Q2

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00

Loans \$ 100.00

*Total Monetary* \$ 100.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ 0.00

*Total Monetary* \$ 0.00

**(8)** Other Distributions \$ 0.00

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

\$ 100.00

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

\$ 0.00

**(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

Name of  Treasurer  Deputy Treasurer

**X**

Signature

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

Name of  Candidate  Chairman (PC/PTY only)

**X**

Signature

