

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

(1) Dr. William P. Maurer (2) (239) 731-0923
 Candidate, Committee or Political Party Name Daytime Telephone Number
17371 Williamsburg Dr. Ft. Myers 33917
 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 #) School Board District 4

Political Committee

Committee of Continuous Existence

Party Executive Committee

Check if PC has DISBANDED

Check if CCE has DISBANDED

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

Reporting Period Covered: From 08, 03, 2002 TO 08, 16, 2002 Report Type: F2

Original Report Amended Report Special Election Report Independent Expenditure Report

(6) CONTRIBUTION FOR THIS REPORTING PERIOD

Cash and Checks 8 _____
 Loans by Candidate \$ 1,000' 00
 TOTAL Monetary for Reporting Period \$ 1,000 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 \$ 171 65
 Transfers to Office Account \$ _____
 TOTAL Monetary Expenditures for Reporting Period 8 171 65

(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:

\$ 5,376 00
 Include amount in (9) from last report on this line.

(10) TOTAL Monetary Expenditures TO DATE:

\$ 3,803 97
 Include 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)

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

Treasurer or Deputy Treasurer

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

Candidate or Chairman (PC/PTY only)

X Dr. William P. Maurer
 Signature of Treasurer or Deputy Treasurer

X Dr. William P. Maurer
 Signature of Candidate or PC/PTY Chairman

DSDE 12 (02/97)

AN IMPORTANT NOTE TO CANDIDATES, PC'S AND PTY'S
 THIS FORM MUST BE SIGNED ON EACH SIDE BY THE APPROPRIATE INDIVIDUAL

RECEIVED
 2002 AUG 20 PM 12:14
 SUPERVISOR'S OFFICE

CAMPAIGN TREASURER'S REPORT (ITEMIZED EXPENDITURES)

(1) Dr. William P. Maurer
Name

(2) (239) 731-0923
Daytime Telephone Number

(3) Reporting Period Covered 2002 / 03 0 08 , 16 / 2002

(4) Page 1 of 1 (itemized expenditures)

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(5) & (6) DATE and Sequence Number	(7) Entity Receiving Payment: Full Name (Last, Suffix , First, Middle) Street Address City-State-Zip Code	(8) PURPOSE OF EXPENDITURE (including bank service fees) NOTE: A candidate cannot contribute to another candidate from campaign funds. (PC's, PTY's, CCE'S- add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment use "ADD or DEL" see Instructions	(11) AMOUNT
8/6/02 1	Supervisor of Elections P.O. Box 2545 Ft. Myers, FL 33902-9888	Fee for Absentee Ballot Labels	MON		50.00
8/6/02 2	Office Depot 13550 Cleveland Ave N. Ft. Myers, FL 33903	Campaign Flyers	MON		12.72
8/12/02 3	Office Depot 13550 Cleveland Ave N. Ft. Myers, FL 33903	Campaign Flyers	MON		16.43
8/12/02 4	U.S. Post Office North Branch Ft. Myers, FL 33903-3381	Postage Stamps	MON		92.50

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 SUPERVISOR OF ELECTIONS