

CAMPAIGN TREASURER'S REPORT SUMMARY

SUPERVISOR OF ELECTIONS
6495 CAROLINE ST. STE. F
MILTON, FL 32570-4592

2014 JUL 22 AM 10 10

(1) Henrietta "Etta" Lawlor

Name

(2) 2532 Cedarcrest Ln

Address (number and street)

Navarre, FL 32566

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Santa Rosa County Commissioner District 4

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 7 / 5 / 2014 To 7 / 18 / 14 Report Type: 2014 P3

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 250.00

Loans \$ _____, _____, .00

Total Monetary \$ _____, _____, 250.00

In-Kind \$ _____, _____, .00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 250.00

Transfers to Office Account \$ _____, _____, .00

Total Monetary \$ _____, _____, 250.00

(8) Other Distributions

\$ _____, _____, .00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,270.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 977.70

(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) Henrietta Lawlor

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Henrietta Lawlor
Signature

(Type name) Henrietta Lawlor

Candidate Chairperson (only for PC and PTY)

X Henrietta Lawlor
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Henrietta "Etta" Lawlor

(2) I.D. Number _____

(3) Cover Period 7 / 5 / 2014 through 7 / 18 / 2014

SUPERVISOR OF ELECTIONS
 6453 CAROLINE ESTERNE
 6453 CAROLINE ESTERNE
 MIAMI, FL 33150-6592

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(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
7 / 11 / 2014	Gulf Breeze Area Chamber 409 Gulf Breeze Parkway Gulf Breeze 32561	Expo Booth	MON		\$250.00
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