

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) TEROLYN P. WATSON
Name

(2) 2946 Dunbar St.
Address (number and street)

Fort Myers Fla 33914
City, State, Zip Code

OFFICE USE ONLY

15 MAR 20 9:50 A

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City Council ward 3
- 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 2/28/15 To 3/13/15 Report Type: P.5

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 150.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 366.85

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 366.85

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 1100.28

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 1098.95

(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) TEROLYN P. WATSON

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

X Jerolyn P. Watson
Signature

(Type name) TEROLYN WATSON

Candidate Chairperson (only for PC and PTY)

X Jerolyn P. Watson
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

15 MAR 20 04:58 A

(1) Name TEROLYN P. WATSON (2) I.D. Number _____

(3) Cover Period 2/28/15 through 3/13/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
3/18/15	Fidelity	B		check			50.00
1							
3/19/15	The Indigo Room 2219 main st. Fort myers Fla 33901	B		check			100.00
2							
1/1							
1/1							
1/1							
1/1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name TEROLYN P. WATSON

(2) I.D. Number _____ 15 MAR 20 04:50 A

(3) Cover Period 2, 28, 15 through 3, 13, 15

(4) Page 1 of 1

(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					
3/6/15	ARTHUR Printing 1518 Cape Coral Fla 33904	CARDS			75.00
1					
3/10/15	Dan Loggins 2946 Dunbar St. Fort Myers Fla 33916	Gas			25.00
2					
3/19/15	ARType 3530 Work Drive Fort Myers Fla 33916	Signs			241.85
3					
3/19/15	Kimberly Watson 2946 Dunbar St. Fort Myers Fla 33916	Gas			25.00
4					
1/1					
1/1					
1/1					
1/1					