

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) TEROLYN P. WATSON
Name

(2) 2946 Dunbar Street
Address (number and street)

FORT MYERS, FL 33916
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(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 11 / 01 / 21 To 11 / 30 / 21 Report Type: 2021 M11

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1,700 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1,700 . 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

\$, 10,425 . 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:

(Type name) CHRISTIE L RILEY
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Christie L Riley
Signature

(Type name) TEROLYN P. WATSON
 Candidate Chairperson (only for PC and PTY)

X Terolyn P. Watson
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 11 / 01 / 21 through 11 / 30 / 21 (4) Page 2 of 3

(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	Amendment	Amount
10 / 08 / 21 1	CREWS ENVIRONMENTAL P.O. BOX 27 FORT MYERS, FL 33912	B	Environmental SERVICES	CHE			500 ⁰⁰
10 / 25 / 21 2	JEANNE A. BOCHETTE P.O. BOX 1593 FORT MYERS, FL 33902	I		CHE			75 ⁰⁰
09 / 15 / 21 3	Site Rite Solutions LLC 1025 Gateway Blvd #303 Bogart, Beach, FL 33426	B	Property Management	CHE			1000 ⁰⁰
11 / 15 / 21 4	SITELBY Mathis General Cleaning AND Labor Services INC	B	GENERAL cleaning + LABOR	CHE			125 ⁰⁰
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Terolyn P. Watson

(2) I.D. Number _____

(3) Cover Period 11 / 01 / 21 through 11 / 30 / 21

(4) Page 3 of 3

(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					
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