

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

(1) Lisa Parsons
Name

(2) 1113 Lee St
Address (number and street)

Palatka, FL 32177
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

Candidate (office sought): School Board Dist 2

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

OFFICE USE ONLY

ONLINE SUBMISSION
[1050114]

Submitted on:
11/12/2012 16:48:08 (eastern)

(3) ID Number: 194

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 8/10/2012 To 11/12/2012 Report Type TR-F

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

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

\$ 5,070.00

(10) TOTAL Monetary Expenditures To Date

\$ 4,706.89

(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)

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X

Signature

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

(Type name)

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lisa Parsons (2) I.D. Number 194

8/10/2012 11/12/2012

(3) Cover Period / / through / / (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lisa Parsons

(2) I.D. Number 194

(3) Cover Period 8/10/2012 through 11/12/2012

(4) Page 1 of 0

(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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