

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Rohan
 Name

(2) 239 S Cove Terr Dr.
 Address (number and street)

Panama City, FL 32401
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1187080]

Submitted on:
 4/12/2019 17:28:53 (eastern)

Check here if address has changed (3) ID Number: 451

(4) Check appropriate box(es):

Candidate Office Sought: Panama City Mayor

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 3 / 30 / 2019 To 4 / 11 / 2019 Report Type: M4D

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 800 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 800 . 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
 \$, 40 , 464 . 26

(10) TOTAL Monetary Expenditures To Date
 \$, 23 , 981 . 04

(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 IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael Rohan (2) I.D. Number 451
 3/30/2019 through 4/11/2019
 (3) Cover Period / / through / / (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	Amendment	Amount
4/11/2019 / /	D" Isernia, Mimi PO box 960 Panama city, fl 32402-0960	I	homeaker	CH			\$500.00
1							
4/3/2019 / /	LAWRENCE, JAMES 3705 ORIOLE ST PANAMA CITY, FL 32406	I	business	CH			\$100.00
2							
4/11/2019 / /	sinicrope, ronald 504 n macarthur ave panama city, fl 32401	I	physician	CH			\$200.00
3							
/ /							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Rohan

(2) I.D. Number 451

(3) Cover Period 3/30/2019 through 4/11/2019

(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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