

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Thomas George Sullivan

Name

(2) 6293 Drude Court

Address (number and street)

Port Charlotte, FL 33981

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 536

(4) Check appropriate box(es):

☒ Candidate Office Sought: 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

OFFICE USE ONLY
ONLINE SUBMISSION
[1160824]

Submitted on:

7/12/2018 08:50:37 (eastern)

(5) Report Identifiers

Cover Period: From 6 / 23 / 2018 To 7 / 6 / 2018 Report Type: P2

☒ Original

☐ Amendment

☐ Special Election 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 \$, , 10 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 10 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 4 , 506 . 72

(10) TOTAL Monetary Expenditures To Date

\$, 4 , 339 . 20

(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 Thomas George Sullivan (2) I.D. Number 536
6/23/2018 7/6/2018
 (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
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Thomas George Sullivan

(2) I.D. Number 536

(3) Cover Period 6/23/2018 through 7/6/2018

(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
6/25/2018 //	Wells Fargo Bank, 13445 S McCall Rd Port Charlotte, FL 33981	standard monthly service fee for thomas g. sullivan campaignaccount	MO		\$10.00
1					
//					
//					
//					
//					
//					
//					