

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

(1) JOHN C LAWLOR

Name

(2) 213 GRANT AVE, LEHIGH ACRES, FL 33936

Address (number and street)

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number:

(4) Check appropriate box(es):

☒ Candidate (office sought): LEE MEMORIAL HEALTH SYSTEM-4

☐ Political Committee☐ CHECK IF PC HAS DISBANDED☐ Committee of Continuous Existence☐ CHECK IF CCE HAS DISBANDED☐ Party Executive Committee☐ Electioneering Communication☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 8/20/2010 To 9/10/2010 Report Type G1

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	500.00
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Loans	\$	0.00
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Total Monetary	\$	500.00
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In-Kind	\$	0.00
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(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	0.00
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Transfers to Office		
Account	\$	0.00

Total Monetary	\$	0.00
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(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,000.00

(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.

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(Type name)

(Type name)

☐ Individual (only for electioneering commun.) ☐ Treasurer ☐ Deputy Treasurer

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

X

X

Signature

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JOHN C. LAWLOR **(2) I.D. Number** 269
(3) Cover Period 8/20/2010 through 9/10/2010 **(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				
9/3/2010 / /	Lawlor, Richard 2359 State Rd 46 Nashville, in 47448	I	psycholog ist	CH	n		\$500.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JOHN C LAWLOR

(2) I.D. Number 269

(3) Cover Period 8/20/2010 through 9/10/2010

(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
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