FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) CATHLEEN MORGAN	OFFICE USE ONLY 359				
Name (2) 27140 SHELL RIDGE CIR, BONITA SPRINGS, F	rt. 3 <i>4</i> 18 <i>4</i>				
Address (number and street)					
Address (number and succe)					
City, State, Zip Code					
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:				
(4) Check appropriate box(es):					
	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	Explored the section of the section				
Cover Period: From $7/21/2012/7$ To	8/9/2012 / Report Type F3				
☐ Original ☑ Amendment ☐ Special Election	Report Independent Expenditure Report				
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
	Monetary				
Cash & Checks \$	Expenditures \$ 0.00				
Loans \$	Transfers to Office Account \$ 0.00				
Total Monetary \$ 200.00	Total				
Total Monotary	Monetary \$ 0.00				
In-Kind \$					
	(8) Other Distributions				
	\$				
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
\$22,592.35_	\$21,446.35_				
	,				
(11) CERT					
	on 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.	I certify that I have examined this report and it is true, correct, and complete.				
(Type name)	(Type name)				
☐ Individual (only for election eering commun.)	Chairperson (only for PC, PTY & electioneering commun. organization)				
X	X				
Signature	Signature				

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	CATHLEEN MORGAN			Z) I.D. Numbe	er3	359	
	7/21/2012		8/9/2012				
(3) Cover Per	iod / /	through	_ 1 1	(4) Pag	ge	of $\frac{1}{}$	
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount	
8/9/2012 /	Dunmire, Richard 506 Santa Barbara Street North Fort Myers, FL 33908	I teacher	СН	34	Add	\$200.00	
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J I							
1 1							
1 1							

(1) Name <u>CATHL</u>	LEEN MORGAN	AIGN TREASURER'S REPORT - ITEN Prigan			MIZED EXPENDITURES (2) I.D. Number 359		
(3) Cover Period	7/21/2012 //	through	8/9/2012	(4) Page	_1 of _	0	
(5) Date (6) Sequence Number	Full N (Last, Suffix, Street Ad City, State	lame First, Middle) Idress &	(8) Purpose (add office sou contribution to	ght if to a Expenditu	(10) re Amendment	(11) Amount	
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