FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) JOHN J SCANLON Name (2) , , Address (number and street)	OFFICE USE ONLY 621					
City, State, Zip Code	(0) ID NIVE I					
☐ CHECK IF ADDRESS HAS CHANGED (3) ID Number: (4) Check appropriate box(es): ☐ Candidate (office sought): FORT MYERS BEACH FIRE-4 ☐ Political Committee ☐ CHECK IF PC HAS DISBANDED ☐ Committee of Continuous Existence ☐ CHECK IF CCE HAS DISBANDED ☐ Party Executive Committee ☐ CHECK IF NO OTHER ELECTIONEERING ☐ COMMUNICATION REPORTS WILL BE FILED						
(5) REPORT	IDENTIFIERS					
Cover Period: From	9/28/2012 / Report Type G2					
☑ Original ☐ Amendment ☐ Special Election	Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$0.00	Monetary Expenditures \$ 0.00					
Loans \$	Transfers to Office Account \$ 0.00					
Total Monetary \$ 0.00 48.63	Total Monetary \$ 0.00					
In-Kind \$						
	(8) Other Distributions \$0.00					
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$					
(11) CERTIFICATION						
I certify that I have examined this report and it is true, correct, and complete. (Type name) Individual (only for election eering commun.)	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	X Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	er6	621					
	9/15/2012			/28/2012			
(3) Cover Perio	od//	thre	ough	1	(4) Pag	e 1	of 1
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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		()		Cara Z	X 22 12	
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	A CONTROL OF THE PARTY OF THE P	Туре	Description	Amendment	Amount
	Scanlon, John J		self	IK	additional		\$48.63
9/20/2012	4265 Bay Beach Ln # 922		employed				
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(1) Name <u>JOHN</u>	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES 1) Name JOHN J SCANLON (2) I.D. Number 621							
(3) Cover Period		/28/2012 //(4	l) Page1	of _	0			
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)			
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount			
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