

## CAMPAIGN TREASURER'S REPORT SUMMARY

**OFFICE USE ONLY**

(1) MARY LOU GAROFALO

Name

(2) 7570 LAUREL VALLEY RD, FORT MYERS, FL 33967

Address (number and street)

City, State, Zip Code

Check here if address has changed

(3) ID Number: 929

(4) Check appropriate box(es):

Candidate Office Sought: SAN CARLOS PARK FIRE-1

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

(5) Report Identifiers

Cover Period: From 10/4/2014 /     /     To 10/10/2014 /     /     Report Type: G5

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      \$     ,     ,     . 848.00

Transfers to Office Account      \$     ,     ,     . 0.00

Total Monetary      \$     ,     ,     . 848.00

(8) Other Distributions      \$     ,     ,     . 0.00

**(9) TOTAL Monetary Contributions To Date**

\$     ,     ,     . 1,000.00

**(10) TOTAL Monetary Expenditures To Date**

\$     ,     ,     . 848.00

**(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:

(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 MARY LOU GAROFALO (2) I.D. Number 929

(3) Cover Period 10/4/2014 /      /      through 10/10/2014 /      /      (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 MARY LOU GAROFALO

(2) I.D. Number 929

(3) Cover Period 10/4/2014 through 10/10/2014

(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) Sequence Number					
10/9/2014 / /	Artype, Inc., 3530 Work Dr. Ft. Myers , Fl 33916	yard signs and h-stands  check #92	MON		\$848.00
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					