

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) SHARON L HARRINGTON  
 Name

(2) PO BOX 2031  
 Address (number and street)

FORT MYERS, FL 33902  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1102473]

Submitted on:  
 4/11/2016 09:17:00 (eastern)

Check here if address has changed (3) ID Number: 1162

(4) Check appropriate box(es):

Candidate Office Sought: SUPERVISOR OF ELECTIONS

Political Committee (PC)

Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded

Party Executive Committee (PTY)  Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 3 / 1 / 2016 To 3 / 31 / 2016 Report Type: M3

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,   1   , 195   . 00

Loans \$      ,      ,   0   . 00

Total Monetary \$      ,   1   , 195   . 00

In-Kind \$      ,      ,   0   . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      , 786   . 06

Transfers to Office Account \$      ,      ,   0   . 00

Total Monetary \$      ,      , 786   . 06

**(8) Other Distributions**  
 \$      ,      ,   0   . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,   7   , 210   . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,   6   , 483   . 61

### (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 SHARON L HARRINGTON (2) I.D. Number 1162  
 3/1/2016 3/31/2016  
 (3) Cover Period / / through / / (4) Page 1 of 2

(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	Type	Description	Amendment	Amount
3/15/2016 / /	Nicholson, Elizabeth 9971 Cypress Lake Dr. Fort Myers, DL 33919	I	retired	CH			\$25.00
1							
3/15/2016 / /	Smoot, Jr., J. Tom 1242 Florida Ave. Fort Myers, FL 33901	I	retired	CH			\$100.00
2							
3/15/2016 / /	Plutino, Joanna K204 9300 Lake Park Dr. Fort Myers, FL 33919	I	admin. assist.	CH			\$100.00
3							
3/15/2016 / /	Trippe, Gary 1275 Kasmada Dr. Fort Myers, FL 33919	I	retired	CH			\$200.00
4							
3/15/2016 / /	Deja, Daniel 2150 Channel Way North Fort Myers, FL 33917	I	retired	CA			\$50.00
5							
3/15/2016 / /	Anonymous, Anonymous Anonymous, FL 33901	I		CA			\$20.00
6							
3/15/2016 / /	Camp Rigby, P O Box 150879 Cape Coral, FL 33915	B		CH			\$100.00
7							
3/15/2016 / /	Adams, Daniel #2304 2104 West First St Fort Myers, FL 33901	I		CH			\$100.00
8							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name SHARON L HARRINGTON (2) I.D. Number 1162  
 3/1/2016 through 3/31/2016  
 (3) Cover Period  / /  through  / /  (4) Page 2 of 2

(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							
3/15/2016 / /	Duff, Glee #602 14300 Riva Del Lago Fort Myers, FL 33907	I		CH			\$100.00
9							
3/15/2016 / /	Dozier, James 1387 Wales Dr Fort Myers, FL 33901	I	retired	CH			\$200.00
10							
3/15/2016 / /	Bryant, Gary 1681 McGregor Reserve Dr Fort Myers, FL 33901	I	insurance	CH			\$200.00
11							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name SHARON L HARRINGTON

(2) I.D. Number 1162

(3) Cover Period 3/1/2016 through 3/31/2016

(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					
3/24/2016 //	Conric PR & Marketing, 6216 Whiskey Creek Dr. Ste #B Fort Myers, FL 339019	marketing services	MO		\$786.06
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