

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) KAREN PUTMAN WATSON  
Name

(2) 2705 VIA SANTA CROCE CT  
Address (number and street)

FORT MYERS, FL 33905  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1146235]

Submitted on:  
11/11/2017 09:42:39 (eastern)

Check here if address has changed

(3) ID Number: 1359

(4) Check appropriate box(es):

- Candidate Office Sought: SCHOOL BOARD-6 AT LARGE
- 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 5 / 1 / 2017 To 5 / 31 / 2017 Report Type: M5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 242 . 30

Total Monetary \$        ,        , 242 . 30

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 2 , 332 . 95

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 805 . 93

### (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           KAREN PUTMAN WATSON           (2) I.D. Number           1359            
 (3) Cover Period           5/1/2017           through           5/31/2017           (4) Page           1           of           1          

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
5/30/2017 / /	Watson, Karen Putman 2705 Via Santa Croce Ct. Fort Myers , FL 33905	S	executive director	LO		Add	\$26.48
1							
5/17/2017 / /	Watson, Karen Putman 2705 Via Santa Croce Ct. Fort Myers, FL 33905	S	executive director	LO		Add	\$215.82
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name KAREN PUTMAN WATSON

(2) I.D. Number 1359

(3) Cover Period 5/1/2017 through 5/31/2017

(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
(6) Sequence Number					
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