	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	JAMES P MURPHY	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	24808 LAKEMONT COVE LN; UNIT 102	Submitted on:							
	Address (number and street)	9/6/2018 12:36:53 (eastern)							
	BONITA SPRINGS, FL 34134  City, State, Zip Code								
		(0) 10 N							
	Check here if address has changed	(3) ID Number:1444							
(4)	Check appropriate box(es):								
	Candidate Office Sought: BONITA SPRING	S FIRE-1							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded							
	☐ Party Executive Committee (PTY)	Check here if PTY has disbanded							
	Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove	er Period: From $8 / 24 / 2018$ To	8 / 31 / 2018 Report Type: G1							
X o	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
	Φ	Monetary							
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , , 42 . 35							
Loar	s , , 0.00	Transfers to							
Loai	,,,	Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 0 . 00								
	·	Total Monetary \$ , , 42 . 35							
In-Ki	nd \$ , , 0.00								
		(8) Other Distributions							
		\$, ,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>1</u> , <u>500</u> . <u>00</u>	\$ , , 42.35							
	(11) Cert It is a first degree misdemeanor for any pers								
1									
10	I certify that I have examined this report and it is true, correct, and complete:								
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		X							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	JAMES P MURPHY				2) I.D. Numbe	er1	444
(3) Cover Perio	8/24/2018 od///	thro	ough	/31/2018 ///	(4) Pag	e	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8)  ontributor  Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name JAMES	P	MURPH	Y				 (2) I.D. Nun	nber		1444	
	8	8/24/20	018		8/31/20	18		-			
(3) Cover Period		I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
8/30/2018	Instant Imprints, 24830 S Tamiami Trail Bonita Springs, fl 34134	printing of business cards for candidate	МО		\$42.35
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