

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JAMES P MURPHY
 Name
 (2) 24808 LAKEMONT COVE LN; UNIT 102
 Address (number and street)
BONITA SPRINGS, FL 34134
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1172976]
 Submitted on:
 9/19/2018 15:51:07 (eastern)

Check here if address has changed (3) ID Number: 1444

(4) Check appropriate box(es):
 Candidate Office Sought: BONITA SPRINGS FIRE-1
 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 9 / 1 / 2018 To 9 / 14 / 2018 Report Type: G2
 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 \$, , 398 . 11
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 398 . 11

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

(9) TOTAL Monetary Contributions To Date
 \$, 1 , 500 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 440 . 46

(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 JAMES P MURPHY (2) I.D. Number 1444

9/1/2018 through 9/14/2018

(3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JAMES P MURPHY

(2) I.D. Number 1444

(3) Cover Period 9/1/2018 through 9/14/2018

(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					
9/9/2018 / /	Jackson Signs, 1109 Tamiami Trail Port Charlotte, Fl 33953	signs for j. murphy campaign. invoice: 1017492	MO		\$318.00
1					
9/9/2018 / /	Jackson Signs, 1109 Tamiami Trail Port Charlotte, Fl 33953	business cards for j. murphy campaign	MO		\$80.11
2					
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