CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	CATHLEEN MORGAN	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION								
(2)	27140 SHELL RIDGE CIR	Submitted on:								
	Address (number and street)	6/27/2020 14:33:04 (eastern)								
	BONITA SPRINGS, FL 34134									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1549								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: SCHOOL BOARD-7 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								
Cove	er Period: From 6 / 13 / 2020 To	6 / 26 / 2020 Report Type: 20P2								
X O	riginal Amendment Spe	ecial Election Report								
(6)	(6) Contributions This Report (7) Expenditures This Report									
Cash	n & Checks \$,, _25 . 00	Monetary								
Loan	s \$, <u>5</u> , <u>000</u> . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Total	Monetary \$,5 , <u>025</u> . <u>00</u>	Total Monetary \$, , 700 . 00								
In-Ki	nd \$,, <u>0</u> . <u>00</u>	, , , , , , , , , , , , , , , , , , , ,								
		(8) Other Distributions \$, , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>8</u> , <u>412</u> . <u>21</u>								
(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										
Х		×								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	CATHLEEN MORGAN				(2) I.D. Numbe	er ₁	1549	
	6/13/2020 od///		6	7/26/2020				
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount	
6/19/2020	Ferrone, Paula 12975 Maiden Cane Lane Bonita Springs, FL 34135	I		СН			\$25.0	
6/24/2020	Morgan, Cathleen 27140 SHELL RIDGE CIRCLE BONITA SPRINGS, FL 34134-8	S 782	school board member	LO			\$5,000.0	
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1 1								

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	CATHLEEN	MOR	RGAN				 (2) I.D. Nun	nber]	L549	
	6/	13/2	020		6/26/20	020		-			
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

Date Full Name Purpose (add office sought if contribution to a Number City, State, Zip Code Candidate Type Amendment Amou	(5)	(7)	(8)	(9)	(10)	(11)
Fort Myers, FL 33901	(6) Sequence	(Last, Suffix, First, Middle) Street Address &	(add office sought if contribution to a	Expenditure Type	Amendment	Amount
	6/19/2020		media	MO		\$700.00
	1	Fort Myers, FL 33901				
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DS-DE 14 (Rev. 11/13)						