

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Lisa Sharon Walsh  
**Name**  
 (2) 15555 Biscayne Bulevard  
**Address (number and street)**  
Miami, FL 33160  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1018155]  
 Submitted on:  
 7/1/2010 15:30:41 (eastern)

**CHECK IF ADDRESS HAS CHANGED**

(3) ID Number: 736

(4) **Check appropriate box(es):**  
 Candidate (office sought): County Court Judge Group 31  
 Political Committee  **CHECK IF PC HAS DISBANDED**  
 Committee of Continuous Existence  **CHECK IF CCE HAS DISBANDED**  
 Party Executive Committee  
 Electioneering Communication  **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**

**(5) REPORT IDENTIFIERS**

Cover Period: From 1/1/2010 To 3/31/2010 / Report Type Q1-10  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>
In-Kind	\$	<u>0.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>2.80</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>2.80</u>

**(8) Other Distributions**  
 \$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
 \$ 137,461.87

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 10,113.98

**(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 electioneering commun.)  Treasurer  Deputy Treasurer

**X** \_\_\_\_\_  
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name     Lisa Sharon Walsh     (2) I.D. Number     736    

1/1/2010 3/31/2010

(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 Lisa Sharon Walsh

(2) I.D. Number 736

(3) Cover Period 1/1/2010 through 3/31/2010

(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					
2/25/2010 / /	PayPal, 2211 North First Street San Jose, CA 95131	paypal expense related to sweep transfer.	MO	Delete	\$47.03
1					
2/25/2010 / /	PayPal, 2211 North First Street San Jose, CA 95131	paypal expense related to sweep transfer.	MO	Add	\$49.83
2					
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