

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

(1) Lois C. Barrett (2) 466-9801
Candidate, Committee or Party Name PHONE #

(3) 242 Stevens Blvd., Ft. Myers Beach, FL 33931
Address (number and street) City State Zip Code

Checkbox if address has changed since last report

(4) Check appropriate box(es):

- Candidate (office sought): Board of Directors, Lee Memorial Health System
- Political Committee Check if PC has DISBANDED
- Committee of Continuous Existence Check if CCE has DISBANDED
- Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 07/01/02 To 07/28/00 Report Type F E

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ 200.00

Total Monetary \$ 200.00

In-kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 150.00

Transfers to Office Account \$ _____

Total Monetary \$ 150.00

(8) Other Distributions \$ _____

9) TOTAL Monetary Contributions to Date
\$ _____, 0000.

10) TOTAL Monetary Expenditures to Date
\$ _____, 150.00

(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

Lois C. Barrett

Name of Treasurer Deputy Treasurer

Lois C. Barrett

Printed Name

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

Lois C. Barrett

Name of Candidate Chairman (PC/PTY Only)

Lois C. Barrett

Signature

CAMPAIGN TREASURER'S REIPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lois C. Barrett (2) PHONE # 466-9801

(3) Cover Period 07/01/00 through 07/28/00 Page -1- of 1

(5) Date	(7) Full Name (last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(9) Contribution Occupation Type	(10) In-kind Description	(11) Amendment	(12) Amount
07/14/00 F1	Barrett, Lois C. 242 Stevens Blvd. Ft. Myers Beach Florida 33931	I	LOAN	N	[REDACTED]	200
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Reid Barrett

(2) PHONE # 466-9801

(3) Cover Period 771100 through 0

(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) Amendmen	(11) Amount
(6) Sequence Number					
07/17/00	PHILINDA A. YOUNG Supervisor of Election5 P.O. Box 2545 Fort Myers, FL 33902	Filing Fee	MON		\$150 ⁰⁰
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