

COPY

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY
(Form Modified for LEE COUNTY use only.)

(1) JOSEPH N. CAMPOCHIARO

Candidate, Committee or Party Name

(2) 489-1964

Telephone Number

(3) 9807 ENSIGN CT

Address (number and street)

FM

City

FLA

State

33919

ZIP Code

Check box if address has changed since last report

(4) Check appropriate box(es):

Candidate (office sought):

HOSPITAL BOARD DIST #2

Political Committee

Check if PC has DISBANDED

Committee of Continuous Existence

Check if CCE has DISBANDED

Party Executive Committee

JUL 29 12 19 PM '98

RECEIVED SUPERVISOR OF ELECTIONS

(5) REPORT IDENTIFIERS

Cover Period: From 107,01,98 To 07,24,98

Report Type _____

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 50.00

Loans 6 _____

Total Monetary \$ 50.00

In-kind \$ _____

TOTAL Monetary Contributions to Date \$ 50.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 25.00

Transfers to Office Account \$ _____

Total Monetary \$ 25.00

(8) Other Distributions \$ _____

TOTAL Monetary Expenditures to Date \$ 25.00

(9) 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

DAVID BULL, JR

Name of Treasurer Deputy Treasurer

X David Bull, Jr

Signature

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

JOSEPH N. CAMPOCHIARO

Name of Candidate Chairman (PC/PTY Only)

X Joseph N. Campocharo

Signature

CAMPAIGN TREASURER'S REPORT-ITEMIZED EXPENDITURES

(1) Name JOSEPH N. CAMPOCHIARO

(2) Phone # 941-489-1964

(1) Cover Period 01, 98 through 07, 24, 98

(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
07/14/98	LEE CO. ELECTIONS P.O. BOX 2545 FM 33902	HOSPITAL # BOARD 2 QUAL. FEE	CHE		RECEIVED FOR SUPER ELECTIONS 25
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JOSEPH N. CAMPOCHIARO

(2) Phone # 941 489 1964

(3) Cover Period 07 01 98 through 07 24 98

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupatio				
07/14/98 I	David M. Bull, Jr 2581 Styles Rd Alva FL 33920			che			\$ 500.00
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