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Image# 14951689392

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Co	mmittee			Office Use Only
NAME OF COMMITTEE (in	TYPE OR PR	·	Example: If typir over the lines.	ıg, type	12FE4M5	
Henry Lawrence	ce for Congress					
l						
	2110 2nd Av	venue, East				
ADDRESS (number an						
Check if dif						
than previous reported. (A					FL :	34221
2. FEC IDENTIFIC	CATION NUMBER	CITY ▲			STATE A	ZIP CODE
C C0055548	32	3. IS THIS	× NEW		AMEND	
		REPORT	(N)	OR	(A)	FL 16
4. TYPE OF REI	PORT (Choose One)					
(a) Quarterly Re	,	(b) 12-Day P	RE -Election Repo	ort for the:		_
April 15	G Quarterly Report (Q1)	L	Primary (12P)	X General (1	12G) Runoff (12R)
			Convention (12C)	Special (1	2S)
July 15	Quarterly Report (Q2)		M M	D D /	Y Y Y Y	in the
October	r 15 Quarterly Report (Q3)	Election	on 11	04	2014	State of
January	31 Year-End Report (YE)	(c) 30-Day P	OST-Election Rep	port for the	 :	
			General (300	à)	Runoff (30	DR) Special (30S)
Termina	tion Report (TER)		M M	D D /	Y Y Y Y	in the
		Election	on			State of
	M M / D D	/ Y " Y " Y " Y	ı	M M	/ D D /	Y " Y " Y " Y
5. Covering Period	10 01	2014	through	10	15	2014
I certify that I have e	xamined this Report and	to the best of my	knowledge and	belief it is t	rue, correct and	d complete.
Type or Print Name of	of Treasurer Curtis Roo	t				
Signature of Treasure	er Curtis Root		[Electronically	Filed]	Date 10	/ 20 / Y Y Y Y Y Y Z014
NOTE: Submission of	false, erroneous, or incom	plete information m	ay subject the per	rson signing	this Report to the	he penalties of 2 U.S.C. §437g.
Office						
Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 17

Write or Type Committee Name

Henry Lawrence for Congress

10 10 15 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 6269.00 3519.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 6269.00 3519.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 6516.99 16846.34 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 6516.99 16846.34 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1178.49 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 25400.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 17

Write or Type Committee Name

Henry Lawrence for Congress

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. CONTRIBU	TIONS (other than loans) FROM:		
Politica	uals/Persons Other Than al Committees mized (use Schedule A)	4450.00	1750.00
, ,	itemized	1819.00	1769.00
	TAL of contributions m individuals	6269.00	3519.00
	al Party Committees	0.00	0.00
` '	as PACs)	0.00	0.00
(e) TOTAL	andidate	0.00	0.00
,	than loans) ines 11(a)(iii), (b), (c), and (d))	6269.00	3519.00
	S FROM OTHER ED COMMITTEES	0.00	0.00
3. LOANS: (a) Made	or Guaranteed by the		
	date	0.00	11000.00
` '	ner Loans	0.00	2500.00
` '	LOANS ines 13(a) and (b))	0.00	13500.00
4. OFFSETS T	TO OPERATING JRES		
(Refunds, F	Rebates, etc.)	0.00	0.00
5. OTHER RE (Dividends,	CEIPTS Interest, etc.)	0.00	0.00
11(e), 12, 1	CEIPTS (add Lines 3(c), 14, and 15)	6269.00	17019.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 17

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	6516.99	16846.34
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	6516.99	16846.34
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	1426.48
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	6269.00
25.	SUBTOTAL (add Line 23 and Line 24)		7695.48
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	6516.99
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		1178.49

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 17 (check only one) 11a 11d 11b 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Henry Lawrence for Congress Full Name (Last, First, Middle Initial) Dannie Brown Date of Receipt Mailing Address 4423 Winston Lane, South 10 2014 03 City State Zip Code Transaction ID: SA11AI.4552 FL 34235 Sarasota FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 300.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Mr. W. Stuart Gregory Date of Receipt Mailing Address 2305 Riverview Boulevard 03 2014 Citv State Zip Code Transaction ID: SA11AI.4553 Bradenton FL 34205 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Chairman DesChamps & Gregory Insurance Receipt For: 2014 Election Cycle-to-Date Primary ✓ General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Sean Murphy Date of Receipt Mailing Address 6600 Gulf Drive 2014 06 City State Zip Code Transaction ID: SA11AI.4557 FL Holmes Beach 34218 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Beach Bistro, INc. Owner Receipt For: 2014 Election Cycle-to-Date | General Primary 300.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 17 Use separate schedule(s) (check only one) 11a 11d 11b 11c Detailed Summary Page 12 13a 13b

for each category of the Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Henry Lawrence for Congress Full Name (Last, First, Middle Initial) **Edmund Sanford** Date of Receipt Mailing Address 6213 Courtside Drive 2014 03 City State Zip Code Transaction ID: SA11AI.4547 FL 34210 Bradenton FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Retired Retired Receipt For: 2014 Election Cycle-to-Date Primary X General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **UA Political Education Committee** Date of Receipt Mailing Address 3 Park Place 80 2014 City State Zip Code Transaction ID: SA11AI.4563 Annapolis MD 21401 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date M General Primary 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Unity Church in the Woods, Inc. Date of Receipt Mailing Address 4200 32nd Street, West 2014 80 City State Zip Code Transaction ID: SA11AI.4564 FL Bradenton 34205 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Receipt For: 2014 Election Cycle-to-Date X General Primary 500.00 Other (specify) 3250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	:	/	OF	17	
(ched	ck only	or	ıe)						
×	11a		11b		11c		11	d	_
	12		13a		13b		14		15

	ry information copied from such Reports and St for commercial purposes, other than using the		
\rangle	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress		
۸.	Full Name (Last, First, Middle Initial) Carolee Villapiano Mailing Address 210 Oakhurst Road City	State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Oakhurst FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2014 Primary General Other (specify)	NJ 07755 C Occupation Retired Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00
3.	Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation Election Cycle-to-Date	Amount of Each Receipt this Period
Э.	Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation Election Cycle-to-Date	Amount of Each Receipt this Period
s	SUBTOTAL of Receipts This Page (optional)		500.00
т	OTAL This Period (last page this line number o	nly)	TT-00.00

SC	HEDULE B	(FEC Form	3)			FOR LINE NUMBER: PAGE 8 OF 17	
	TEMIZED DISBURSEMENTS			Use separate schedule(s) (of for each category of the		(check only one)	
16				Detailed Summar		X 17 18 19a 19b	
Λn	, information coni	ad from such Papart	a and Statements m	av not be cold or	used by any n	20a 20b 20c 21 erson for the purpose of soliciting contributions	
						e to solicit contributions from such committee.	
\	NAME OF COMM	, ,					
/_	Henry Lawre	ence for Congr	ess				
		First, Middle Initial)					
۹.	Authorize.N	et				Date of Disbursement	
ı	Mailing Address	P.O.Box 8999				10 02 2014	
-	City		State	Zip Code		Amount of Each Disbursement this Period	
	San Francisco		CA	98128		Amount of Each Disbursement this Penou	
Ī	Purpose of Disbu	rsement				62.50	
_	Service charge				001	Transaction ID : SB17.4610	
	Candidate Name Henry Lawr e	ence for Congr	ess		Category/ Type		
(Office Sought:	X House	Disbursement For:	2014			
		Senate	Primary	General			
	State· FL	President	Other (s	pecify) Runoff			
	Otato.	District: 16 First, Middle Initial)					
	City of Palm					Date of Disbursement	
3. Only of Familiano							
Ī	Mailing Address	516 8th Avenue, Wes	t			10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
(City		State	Zip Code		Amount of Each Disbursement this Period	
_	Palmetto		FL	34221			
I	Purpose of Disbui Water bill	rsement			004	352.46	
-	Candidate Name				001	Transaction ID : SB17.4609	
(ence for Cong	ress		Category/ Type		
(Office Sought:	★ House	Disbursement For:	: 2014	71: -		
	_	Senate	Primary	X General			
		President	Other (s				
	State: FL	District: 16					
	•	First, Middle Initial)				Data of Dishumannasi	
Э.	Democratic	Club of Saraso	ota			Date of Disbursement	
ī	Mailing Address	DO Dov 54076				10 09 2014	
	ag / .aaeee	PO Box 51076				10 09 2014	
(City			o Code		Amount of Each Disbursement this Period	
	Sarasota	ro am ant	FL 3	4232		210.00	
-	Purpose of Disbui Marina Jack Fund	draiser			003	210.00	
(Candidate Name				Category/	Transaction ID : SB17.4618	
	Henry Lawr	nry Lawrence for Congress Category/ Type					
(Office Sought:	X House	Disbursement For:				
		Senate	Primary	General			
	Olala El	President	Other (s	pecify)			
	State: FL	District: 16					

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 17 (check only one) X 17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and		any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Henry Lawrence for Congress	7,1	
Full Name (Last, First, Middle Initial) A. NationBuilder Meiling Address 440 South Hill Street Suite 200		Date of Disbursement 10 14 2014
Mailing Address 448 South Hill Street, Suite 200	7'- 0-1-	
City State San Francisco CA	Zip Code 90013	Amount of Each Disbursement this Period
Purpose of Disbursement Service charge	00	38.00 Transaction ID : SB17.4622
Candidate Name Henry Lawrence for Congress		gory/ pe
Office Sought: House Disbursement Formary		
State: FL District: 16	Cate Ty	Date of Disbursement M M M / D D / Y Y Y Y Y 10
Full Name (Last, First, Middle Initial) Sarasota Herald Tribune Mailing Address 1741 Main Street		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	ip Code 34236	Amount of Each Disbursement this Period
Internet advertising Candidate Name Henry Lawrence for Congress Office Sought: House Disbursement Formary	Cate Ty	gory/pe
State: FL District: 16		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

S

S	CHEDULE B (FEC Form 3)			FOR LINE NUMBER: PAGE 10 OF 17		
	EMIZED DISBURSEMENTS	Use separate schedule(s) (of for each category of the		(check only one)		
"	EMIZED DISBORSEMENTS	Detailed Summar		X 17 18 19a 19b 20a 20b 20c 21		
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a			erson for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)	, ,				
	Henry Lawrence for Congress					
	Full Name (Last, First, Middle Initial)					
A.	Montie Suarez			Date of Disbursement		
	Mailing Address 5722 Olive Avenue			10 03 7 2014		
	City State	Zip Code		Amount of Each Disbursement this Period		
	Sarasota FL	34231				
	Purpose of Disbursement Consulting fees		001	400.00		
	Candidate Name		001	Transaction ID : SB17.4612		
	Henry Lawrence for Congress		Category/ Type			
	Office Sought: House Disbursement For	: 2014	.,,,,,			
	Senate Primary	General				
	President Other (s	pecify)				
_	State: FL District: 16 Full Name (Last, First, Middle Initial)					
	Universal Business Systems			Date of Disbursement		
B.	Simologic Edemose Cycleme					
	Mailing Address 5326 West Crenshaw Street			10 08 7 7 9 9		
	City State	Zip Code		Amount of Each Disbursement this Period		
	Tampa FL	33634		442.96		
	Purpose of Disbursement Bumper stickers		004	443.86		
	Candidate Name			Transaction ID : SB17.4615		
	Henry Lawrence for Congress		Category/ Type			
	Office Sought:					
	Senate Primary					
	President Other (s	pecify)				
_	State: FL District: 16 Full Name (Last, First, Middle Initial)					
C.	Universal Business Systems			Date of Disbursement		
	Mailing Address 5326 West Crenshaw Street			10 08 7 Y Y Y Y Y Y X		
		p Code		Amount of Each Disbursement this Period		
	Tampa FL 3 Purpose of Disbursement	3634		979.05		
	Yard signs 004			, , ,		
	Candidate Name		Category/	Transaction ID : SB17.4616		
	Henry Lawrence for Congress		Type			
	Office Sought: House Disbursement For					
	Senate Primary President Other (s	General Decify)				
	State: FL District: 16	pooliy)				

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedul for each category of t Detailed Summary Pa	the X 17 18 19a 19b
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Henry Lawrence for Congress		
Full Name (Last, First, Middle Initial) A. Universal Business Systems		Date of Disbursement
Mailing Address 5326 West Crenshaw Street		10 09 2014
City Sta Tampa FL	te Zip Code 33634	Amount of Each Disbursement this Period
Purpose of Disbursement Stickers & envelopes		004 Transaction ID : SB17.4617
Candidate Name Henry Lawrence for Congress		ategory/ Type
Senate Pr	nt For: 2014 mary	
Full Name (Last, First, Middle Initial) Universal Business Systems Mailing Address 5326 West Crenshaw Street		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sta	'	Amount of Each Disbursement this Period
Tampa FL Purpose of Disbursement T-shirts	33634	749.00 Transaction ID : SB17.4624
Candidate Name Henry Lawrence for Congress	С	ategory/ Type
Senate Pr	nt For: 2014 mary X General her (specify)	
Full Name (Last, First, Middle Initial)		
Mailing Address		Date of Disbursement
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	Tr	
Candidate Name	C	ategory/ Type
	nt For: mary General her (specify)	
Otato. District.		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1322.50

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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17

(check only one) Detailed Summary Page Transaction ID: SC/10.4146 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Henry Lawrence General Mailing Address Other (specify) 2110 2nd Avenue, East State ZIP Code City FL 34221 Palmetto Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 05^M ž014 5/1/2015 5.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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X	13a
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Detailed Summary Page Transaction ID: SC/10.4165 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Henry Lawrence General Mailing Address Other (specify) 2110 2nd Avenue, East State ZIP Code City FL 34221 Palmetto Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 ^M06^M ž014 5/1/2014 5.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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17

Detailed Summary Page Transaction ID: SC/10.4276 NAME OF COMMITTEE (In Full) Henry Lawrence for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Henry Lawrence General Mailing Address Other (specify) 2110 2nd Avenue, East State ZIP Code City FL 34221 Palmetto Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 07^M ž014 5.00 11/30/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	13b

DANS			Detailed Summary Page	
AME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.4337
Henry Lawrence for Congre	ess			
LOAN SOURCE Full Name (Last	, First, Middle	e Initial)		Election: 2014
Henry Lawrence				Primary General
Mailing Address 2110 2nd Avenue, East				Other (specify)
City	S	tate ZIP Cod	de	-L
Palmetto		FL 34221		
Original Amount of Loan	00.00	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period 700.00
TERMS	4	, ,		<u> </u>
Date Incurred M 08 / D06 / Y 2014	Y M	Date Due	Interest Rate /30/2014 5.00	
List All Endorsers or Guarantors	s (if any) to I	oan Source		
1. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1
SUBTOTALS This Period This Page	(optional)		·····	700.00
FOTALS This Period (last page in the	is line only)		······	y y
Carry outstanding halance only to I	INF 3 School	ule D for this line If	no Schedule D. carry for	ward to appropriate line of Summary

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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JAN5		Detailed Summary Page	(Check only one) X 13b
AME OF COMMITTEE (In Full) Ienry Lawrence for Congress		Transacti	ion ID : SC/10.4172
LOAN SOURCE Full Name (Last, First, Midd Geneva Presha	le Initial)		Election: 2014 Primary General
Mailing Address 2110 2nd Avenue, East			Other (specify)
City S Palmetto	State ZIP Code FL 34221		
Original Amount of Loan 2500.00	Cumulative Payment To D	ate Balan	ace Outstanding at Close of This Period
TERMS Date Incurred MO6 / DO6 / Y 2014 Y		Interest Rate /2015 Y 5.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Dutstanding:	9 9
2. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Dutstanding:	9 9
3. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address	(Occupation	
City State	ZIP Code	Amount Guaranteed Dutstanding:	9
4. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address	(Occupation	
City State	ZIP Code	Amount Guaranteed Dutstanding:	9 9
UBTOTALS This Period This Page (optional)		······	2500.00
OTALS This Period (last page in this line only). Carry outstanding balance only to LINE 3, Scheen			

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 17 OF

	13a
$oldsymbol{ abla}$	13h

DANS		Detailed Summary Page	
AME OF COMMITTEE (In Full)		Transac	ction ID : SC/10.4324
Henry Lawrence for Congres	ss		
LOAN SOURCE Full Name (Last,	First, Middle Initial)		Election: 2014
Geneva Presha			Primary X General
Mailing Address			Other (specify)
2110 2nd Avenue, East			
City	State	ZIP Code	
Palmetto	FL	34221	
Original Amount of Loan	Cumulative Pay	ment To Date Bala	ance Outstanding at Close of This Period
1200	.00	0.00	1200.00
		9 9	9 9
TERMS Date Incurred	D	ate Due Interest Rate	e Secured:
^M 07 ^M / ^D 05 ^D / Y Ž014	Y M M / D D	/ Y11/30/2014 Y 5.00	% (apr)
List All Endorsers or Guarantors	(if any) to Loan Source		Yes No
Full Name (Last, First, Middle In	· · · · · · · · · · · · · · · · · · ·	Name of Employer	
	,		
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9
2. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle In	tial)	Name of Employer	
Marilia a Antono a			
Mailing Address		Occupation	
011	01.1. 710.0.1	Amount	
City	State ZIP Code	Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This Page (d	ptional)	······	1200.00
TOTALS This Period (last page in this	line only)		25400.00
Carry outstanding balance only to LIN	IF 3 Schedule D for this	line If no Schedule D. carry for	ward to appropriate line of Summary