07/14/2014 20 : 30

PAGE 1 / 14

### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3 For An	Authorized Committee	Office Use Only
NAME OF COMMITTEE (in full)  TYPE OR PRI	NT ▼ Example: If typing, type over the lines.	12FE4M5
Henry Lawrence for Congress		
ADDRESS (number and street)	enue, East	
<u> </u>		
Check if different than previously Palmetto reported. (ACC)		FL 34221 -
2. FEC IDENTIFICATION NUMBER ▼	CITY ▲	STATE ZIP CODE A
C C00555482	3. IS THIS REPORT NEW (N) OR	AMENDED (A) STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  Termination Report (TER)	(b) 12-Day PRE-Election Report for the:  Primary (12P)  Convention (12C)  Election on  (c) 30-Day POST-Election Report for the General (30G)  Election on	General (12G)  Special (12S)  In the State of
5. Covering Period May 7 01 01	/ Y Y Y Y Y Y Through M 06	M / D D / Y Y Y Y Y 30 2014
I certify that I have examined this Report and	to the best of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer Curtis Root		
Signature of Treasurer Curtis Root	[Electronically Filed]	Date 07 14 2014
NOTE: Submission of false, erroneous, or incomp	olete information may subject the person signing	g this Report to the penalties of 2 U.S.C. §437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)

### SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 14

2014

30

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Report Covering the Period:

### Henry Lawrence for Congress

From:

			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	3519.00	3519.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3519.00	3519.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	16846.34	16846.34
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	16846.34	16846.34
8.		sh on Hand at Close of porting Period (from Line 27)	172.66	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on needule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed <b>BY</b> Committee (Itemize all on needule C and/or Schedule D)	13500.00	

### 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 PAGE 3 / 14 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

### Henry Lawrence for Congress

06 2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	1750.00	1750.00
	(ii) Unitemized	1769.00	1769.00
	(iii) TOTAL of contributions from individuals	3519.00	3519.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	3519.00	3519.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS: (a) Made or Guaranteed by the		
	Candidate	11000.00	11000.00
	(b) All Other Loans(c) TOTAL LOANS	2500.00	2500.00
	(add Lines 13(a) and (b))	13500.00	13500.00
4.	OFFSETS TO OPERATING EXPENDITURES		
	(Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
3.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	17019.00	17019.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	16846.34	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
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(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)	16846.34	16846.34
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPORT	TING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 10	6, page 3)	17019.00
25.	SUBTOTAL (add Line 23 and Line 24)		17019.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	16846.34
27.	CASH ON HAND AT CLOSE OF REPORTING	PERIOD	172.66

### SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

	FOR LINE NUMBER:	PAGE	5 OF	14
Use separate schedule(s)	(check only one)			
for each category of the	X 11a 11b	11c	11d	
Detailed Summary Page	12 13a	13b	14	15

				tanoa oc	inninary re	.90		12		13a	13b	14		15
Ar	ly information copied from such Reports and S for commercial purposes, other than using the	tatements m	nay not addres	t be solo	d or used political o	by any po	erso	n for th	e pi	urpose ributior	of solicit	ting con	tribut nmitt	tions tee.
	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress			·										
_	Full Name (Last, First, Middle Initial)  Juanita Adams							Data						
A.	Mailing Address 508 Pecan Lane							Date o		eceipt 15		2014	Y	
	City	State		ip Code			Т	ransact	tion	ID : SA	A11AI.41	53		
	Bradenton	FL	- 3	34212			_							
	FEC ID number of contributing federal political committee.	С						Amoun	nt of	Each	Receipt 1	-	_	
	Name of Employer Retired	Occupation Retired	n						-	-		2	50.00	)
	Receipt For: 2014	Election C	ycle-to	-Date										
	Primary General Other (specify)		,	. ,	250	0.00								
В.	Full Name (Last, First, Middle Initial)  Carl Battle							Date o	of Re	eceipt				
D.	Mailing Address 3001 Founders Club Drive					м = м 04	/	02		2014		1		
	City	State		ip Code			T	ransact	tion	ID : SA	11AI.41	33		
	Sarasota	FL		34240										
	FEC ID number of contributing federal political committee.	С						Amour	nt of	Each	Receipt		-	
	Name of Employer	Occupation	n							,		10	00.00	)
	GlaxoSmithKlein	Chief Paten	nt Coun	nsel										
	Receipt For: 2014	Election C	ycle-to	-Date										
	Primary General Other (specify)		,	,	1000	0.00								
_	Full Name (Last, First, Middle Initial) Thomas Finnerty							Date o	of Re	eceipt				
C.	Mailing Address 13503 4th Plaza, East							м = м 04	/	02		2014		1
	City Bradenton	State FL		ip Code 34212			Т	ransac	tion	ID : S	A11AI.41	34		
	FEC ID number of contributing federal political committee.	С			:::			Amour	nt of	Each	Receipt	this Peri	iod	_
	Name of Employer	Occupation	n				1	L.				5	00.00	0
	Real Estate Sales	Finnerty Pr	opertie	es						7	7			
	Receipt For: 2014	Election C	ycle-to	-Date										
	Primary General Other (specify)		,	. ,	50	0.00								
s	UBTOTAL of Receipts This Page (optional)											175	50.00	)
Г	OTAL This Period (last page this line number of								I	,		175	50.00	

## SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 6 OF 14 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 11d Detailed Summary Page 12 13b

ITEMIZED RECEIPTS X 13a 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) Henry Lawrwnce Date of Receipt Mailing Address 2110 2nd Avenue, East 2014 01 City State Zip Code Transaction ID: SA13A.4146 FL 34221 Palmetto FEC ID number of contributing Amount of Each Receipt this Period С H4FL16146 federal political committee. 10000.00 Name of Employer Occupation Self-employed Self-employed Receipt For: 2014 Election Cycle-to-Date X General Primary 10000.00 Other (specify) Full Name (Last, First, Middle Initial) Henry Lawrwnce Date of Receipt Mailing Address 2110 2nd Avenue, East 06 04 2014 City State Zip Code Transaction ID: SA13A.4165 Palmetto FL 34221 FEC ID number of contributing Amount of Each Receipt this Period С H4FL16146 federal political committee. 1000.00 Name of Employer Occupation Self-employed Self-employed Receipt For: 2014 Election Cycle-to-Date M General Primary 11000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 11000.00 SUBTOTAL of Receipts This Page (optional)..... 11000.00 TOTAL This Period (last page this line number only).....

Receipt For:

Primary

Other (specify)

General

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

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

lm	age# 14961575623			
	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 14 (check only one)  11a
	ly information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) Henry Lawrence for Congress			
Δ.	Full Name (Last, First, Middle Initial) Geneva Presha			Date of Receipt
	Mailing Address 2110 2nd Avenue, East			06 06 7 2014
	City Palmetto	State FL	Zip Code 34221	Transaction ID : SA13B.4172
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 2500.00
	Name of Employer Self-employed	Occupation Self-employ		2300.00
	Receipt For: 2014 Primary General Other (specify)	Election Cy	ycle-to-Date 2500.00	
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			M   M
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Election Cy	ycle-to-Date	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
٥.	Mailing Address  City	State	Zip Code	M M / D D / Y Y Y Y
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer	Occupation	I	

Election Cycle-to-Date

2500.00

	lage# 14301373024			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summa	nedule(s) (d y of the	OR LINE NUMBER: PAGE 8 OF 14 check only one)    X   17
	y information copied from such Reports and Statements of for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)  Henry Lawrence for Congress			
<b>A</b> .	Full Name (Last, First, Middle Initial) Authorize.Net			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address P.O.Box 8999  City State San Francisco CA	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly Service Charge	98128	001	70.25 Transaction ID : SB17.4206
	Candidate Name  Office Sought: House Disbursement For Senate Primary President Other (state: District:	General	Category/ Type	
3.	Full Name (Last, First, Middle Initial) Auto Owners Insurance  Mailing Address 15950 Bay Vista Drive			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Suite 140  City State  Clearwater FL  Purpose of Disbursement Liability Insurance  Candidate Name	Zip Code 33758	001 Category/	Amount of Each Disbursement this Period  329.08  Transaction ID: SB17.4213
	Office Sought:  House Senate President  State:  Disbursement For Primary Other (s	General	Туре	
С.	Full Name (Last, First, Middle Initial)  Daphne Boyd  Mailing Address			Date of Disbursement
	Holmes Beach FL 3  Purpose of Disbursement Auto Expenses  Candidate Name	ip Code 34218	001 Category/ Type	Amount of Each Disbursement this Period  20.00  Transaction ID : SB17.4203
	Office Sought:  House  Senate  Primary  President  Other (s	General		

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

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

## S

•			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summary	edule(s) (d	OR LINE NUMBER: PAGE 9 OF 14  check only one)    X   17
Any information copied from such Reports and Stor for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,		
Henry Lawrence for Congress			
Full Name (Last, First, Middle Initial)			
<ul> <li>A. City of Palmetto</li> </ul>			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 516 8th Avenue, West			05 14 2014
City	State Zip Code		Amount of Each Disbursement this Period
Palmetto	FL 34221		Amount of Each disbursement this Period
Purpose of Disbursement			300.00
Water Deposit		001	Transaction ID : SB17.4198
Candidate Name		Category/	
	. 5 . 0044	Туре	
Office Sought: House Disbur	sement For: 2014  Primary		
President	Primary General Other (specify)		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. Florida AFL-CIO			Date of Disbursement
ь.	M M / D D / Y Y Y		
Mailing Address 135 South Monroe Street	06 07 2014		
City	State Zip Code		Amount of Each Disbursement this Period
Tallahassee	FL 32301		
Purpose of Disbursement Candidate Reception		222	300.00
Candidate Name		003	Transaction ID : SB17.4210
Candidate Name		Category/	
Office Sought: House Disbur	sement For: 2014	Туре	_
	Primary Seneral		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			
c. Florida Secretary of State			Date of Disbursement
Mailing Address 500 South Bronough Street			05 01 2014
Room 316, R.A. Gray Bldg.			
City Sta	Amount of Each Disbursement this Period		
Tallahassee F	10440.00		
Purpose of Disbursement Filing Fee	001	10440.00	
Candidate Name		Transaction ID : SB17.4195	
		Category/ Type	
- H	sement For: 2014		
Senate   President	Primary Seneral Other (specify)		
State: District:	Other (apecity)		
State. Bistrict.			

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

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

Candidate Name

Office Sought:

State:

House

Senate

District:

President

### SCHED **ITEMIZ**

Image# 14961575626			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	edule(s) (of the	FOR LINE NUMBER: PAGE 10 OF 14 check only one)    X   17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a			
NAME OF COMMITTEE (In Full) Henry Lawrence for Congress			
Full Name (Last, First, Middle Initial)  A. Oriental Village Restaurant, Inc.			Date of Disbursement
Mailing Address 2907 27th Avenue, West			06 06 2014
City State Bradenton FL  Purpose of Disbursement	e Zip Code 34205		Amount of Each Disbursement this Period
Rent Deposit  Candidate Name		001 Category/ Type	Transaction ID : SB17.4214
	t For: 2014 mary X General er (specify)	турс	
B. Full Name (Last, First, Middle Initial) Sarasota Herald Tribune  Mailing Address 1741 Main Street			Date of Disbursement  M M M / D D / Y Y Y Y Y  06 04 _ 2014
City State	e Zip Code		Amount of Each Disbursement this Period
Sarasota FL Purpose of Disbursement Digital Marketing	34236	004	1200.00
Candidate Name		Category/ Type	Transaction ID : SB17.4208
	t For: 2014 mary X General er (specify)		
Full Name (Last, First, Middle Initial)  C. Montie Suarez			Date of Disbursement
Mailing Address 5722 Olive Avenue			04 30 2014
City State Sarasota FL Purpose of Disbursement	Zip Code 34231		Amount of Each Disbursement this Period 425.00
Consulting Fees		001	Transaction ID : SB17.4193

Category/ Type

Disbursement For: 2014

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

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

Primary

Other (specify)

X General

***	lage# 14901373027				
	CHEDULE B (FEC EMIZED DISBURS	•	Use separate sch for each category Detailed Summary	edule(s) ( of the	FOR LINE NUMBER: PAGE 11 OF 14 check only one)    X   17
					erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\frac{\Im}{2}$	NAME OF COMMITTEE (In Henry Lawrence for	Full)	addition of diff		
۹.	Full Name (Last, First, Midd Montie Suarez				Date of Disbursement
	Mailing Address 5722 Olive	e Avenue			04 30 2014
	City Sarasota	State FL	Zip Code 34231		Amount of Each Disbursement this Period
	Purpose of Disbursement Automobile Expenses			001	250.00 Transaction ID : SB17.4194
	Candidate Name			Category/ Type	
	Office Sought: Hou Sen Pres		General		
3.	Full Name (Last, First, Midd Montie Suarez  Mailing Address 5722 Olive				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sarasota	State FL	Zip Code 34231		Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting Fees	·-	0.1201	001	425.00 Transaction ID : SB17.4199
	Candidate Name			Category/ Type	Transaction in . 3517.4199
	Office Sought: Hou Sen Pres		General		
	Full Name (Last, First, Midd	dle Initial)			
Э.	Montie Suarez				Date of Disbursement
	Mailing Address 5722 Olive				05 16 2014
	City Sarasota Purpose of Disbursement Auto Expenses		p Code 4231		Amount of Each Disbursement this Period 50.00
	Candidate Name			001 Category/ Type	Transaction ID : SB17.4200
	Office Sought: Hou Sen Pres		<b>X</b> General		

State:

District:

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

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

725.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

12

×	13a
	13b

14

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 Lawrwnce 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 <sup>M</sup> 05<sup>M</sup> 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** 

13

×	13a
	13h

14

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 Lawrwnce 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 <sup>M</sup>06<sup>M</sup> 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)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 14 OF

	13a
$oldsymbol{ abla}$	13h

14

DANS			Detailed Summary Pa	and I (Check only one)	13a 13b
AME OF COMMITTEE (In Full)			Transa	action ID : SC/10.4172	
Henry Lawrence for Con	gress				
LOAN SOURCE Full Name (L	Last, First, Midd	le Initial)		Election: 2014	
Geneva Presha				Primary	
Mailing Address				General Other (enesity)	
2110 2nd Avenue, East				Other (specify)	
City	S	State ZIP Cod	de		
Palmetto		FL 34221			
Original Amount of Loan		Cumulative Payment To	Date Bal	alance Outstanding at Close of This P	'eriod
2	2500.00		0.00	2500.00	
TERMS  Date Incurred		Date Due	Interest Rat	ite Secured:	
	2014 Y		/1/2015 Y 5.0	00 % (apr)	j No
List All Endorsers or Guaran	itors (if any) to	Loan Source		Yes	No
1. Full Name (Last, First, Mid	ddle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
2. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	7	
3. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
4. Full Name (Last, First, Midd	dle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9 9 9	
SUBTOTALS This Period This Pa	age (optional)			2500.00	$\overline{}$
FOTALS This Period (last page in	n this line only).			13500.00	Ħ
				9 9 9	_
Carry outstanding balance only	to LINE 3 Sched	dule D for this line If r	o Schedule D. carry for	rward to appropriate line of Summa	arv