CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Sharise V. Riley	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	https://www.vote4shariseriley.com; P.C	D. Box. 11463 [1165239] Submitted on:							
	Address (number and street)	3/1/2019 17:29:00 (eastern)							
	Jacksonville, FL 32239								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:800							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: City Council District 7 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	Identifiers							
Cove	er Period: From <u>2</u> / <u>16</u> / <u>2019</u> To								
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$,,,	Monetary							
Loar	s , , , ,	Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , , 000	Total Monetary \$, 2 ,577 . 06							
In-Ki	ind \$,1, _02125								
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(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 IE									
X	gnature	X Signature							
21	unature	i olunature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sharise V. Riley		(2) I.D. Number							
	2/16/2019			/22/2019		-				
(3) Cover Perio	od / /	through	n	<i>I I</i>	(4) Page	<u> </u>	of			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)			
Sequence	Street Address &	Contri	(S1384-165-165-00-617)	Contribution	In-kind	A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
Number	City, State, Zip Code Riley, Sharise	Type Oo	broker	Type IK	Description campaign	Amendment	Amount \$1,021.2			
2/18/2019	PO Box 11463 Jacksonville, FL 32239	b le	DIOREI	IK	supplies		Ψ1,021.2			
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Sharise	e V. Ri	lley				 (2) I.D. Nun	nber	8	300	
		2/16/2	019		2/22/20	019					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
2/16/2019	Mania, Postcard 2145 Sunnydale Blvd 102 Clearwater, FL 33765	mailings	MO		\$2,577.06
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