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 [1165954] Submitted on:						
	Address (number and street)	3/15/2019 20:34:48 (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 3 / 2 / 2019 To							
X O	original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	h & Checks \$, , <u>240</u> . <u>00</u>	Monetary						
Loar		Transfers to Office Account \$, , , 0 . 00						
Tota	Monetary \$,1, 415 . 00	Total Monetary \$, , 0 . 00						
In-Ki	ind \$,,,000	, , , <u>00</u>						
		(8) Other Distributions \$, , 000_						
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc							
(T	(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 Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)							
X		X						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameSha	iley		(2) I.D. Number						
	3/2/2019	9		3/14/	2019				
(3) Cover Period	1	1	through	1	1	(A) Page	1	of	1

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(6)	(9)	(10)	(1.1)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
3/6/2019	Jones, Mary 16189 Magnolia Grove Way Jacksonville, FL 32218		re agent	СН			\$200.00
1							
3/6/2019	McNeal, Gloria 7142 Gunston Hall Ct Jacksonville, FL 32220	I	childcare	CA			\$20.00
2							
3/6/2019	McNeal, David 7142 Gunston Hall Ct Jacksonville, FL 32220	I	retired	CA			\$20.00
3							
3/11/2019 / /	Riley, Sharise PO Box 11463 Jacksonville, FL 32239	S	re broker	LO	campaign ads and supplies		\$175.0
4							
3/14/2019	Riley, Sharise PO Box 11463 Jacksonville, FL 32239	S	re broker	LO	campaign ad and supplies		\$1,000.0
5							
I I							
1 1							
1 1							

(1) Name	CAMPAIGN TREASUREI Sharise V. Riley	ED EXPENDITU (2) I.D. Number	RES 800	
(3) Cover	9/2/2019 Period / / / through	3/14/2019 1//	(4) Page1	of 0
(5) Date	(7) Full Name	(8) Purpose	(9)	(10) (11)

(5) Date (6) Sequence Number	(7) 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
//					
//					
//					
//					
//					
//					
//					
//					