CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Solomon Olopade	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	P.O. Box 16163	Submitted on:							
	Address (number and street) Jacksonville, FL 32245	11/13/2018 15:47:48 (eastern)							
	City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 861							
(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	dentifiers							
Cove	er Period: From <u>10</u> / <u>1</u> / <u>2018</u> To	10 / 31 / 2018 Report Type: M10							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, 8 , _00000	Total Monetary \$, , 346 . 84							
In-Ki	and \$,, <u>0</u> .00	,,							
		(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								
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Solomon Olopade			(2) I.D. Number					
	10/1/2018			0/31/2018					
(3) Cover Peri	od / /	thro	ough	<i>l l</i>	(4) Pag	e <u>1</u>	of		
	3	T .		T					
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind				
Sequence Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount		
	Olopade, Solomon		architect	LO	loan		\$8,000.0		
10/30/2018	P.O Box 16163 Jacksonville, Fl 32245								
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Solomon	Olopa	de				 (2) I.D. Nun	nber	8	361	300
	1	0/1/20	18		10/31/2	2018	~ ~				
(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
10/16/2018	SOE, 105 E Monroe Street Jacksonville, Fl 32202	petitions	МО		\$11.30
1 10/23/2018	SOE, 105 E Monroe Street Jacksonville, FL 32202	petitions	МО		\$7.10
2 10/25/2018		flyong	MO		\$328.44
3	Champion Printing, 10095 Beach Blvd Jacksonville, FL 32246	flyers	МО		\$328.44
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