CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Vote Yes for Success	OFFICE USE ONLY							
( - /	Name	ONLINE SUBMISSION							
(2)	201 W, Marion Ave Suite 1204	[1176044]							
	Address (number and street)	Submitted on:							
	Punta Gorda, FL 33950	10/12/2018 20:29:28 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 524							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought:</li> <li>☑ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	(5) Report	Identifiers							
Cove	er Period: From 9 / 29 / 2018 To	10 / 5 / 2018 Report Type: <u>G4</u>							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$ , , _80 . 00	Monetary							
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , , 80 . 00	Total Monetary \$ , , <u>525</u> . 00							
In-Ki	nd \$,,,000								
		(8) Other Distributions \$ , , 000							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
` ,	\$	\$, <u>27</u> , <u>535</u> . <u>41</u>							
	(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							
Sie	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Vote Yes for Succe	SS			2) I.D. Numbe	er <u> </u>	524
	9/29/2018		1	0/5/2018			
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	je	of
	1	T		Y .		T	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_		_			
Sequence	Street Address &		ontributor	Contribution	In-kind	***************************************	<b>*</b> -2000000-200000 <b>*</b>
Number	City, State, Zip Code TAILLON, ANGELA		Occupation school	Type CH	Description	Amendment	Amount \$80.0
10/3/2018	2287 BONN CT		administra				\$00.0
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	<i>J</i> ote	Yes for	Succ	ess			 (2) I.D. Nur	nber	Ţ	524	
		9/29/2	018		10/5/2	018	**	-			
(3) Cover Per	riod	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
9/30/2018	WEB ELECT, 10150 HIGHLAND MANOR DR, #200 TAMPA, FL 33610	campaign software	МО		\$400.00
1					
10/3/2018	C AND R GRAPHICS, 2320 TAMIAMI TRAIL PORT CHARLOTTE, FL 33952	info cards	MO		\$125.00
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DS-DE 14 (Rev.					