	CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	JEFFERY TYRE	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	5813 NW LAKE JEFFERY RD	Submitted on:								
	Address (number and street)	3/10/2020 22:03:06 (eastern)								
	LAKE CITY, FL 32055									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1232								
(4)	Check appropriate box(es):									
	County commission of the County commission of	SION DIST 3								
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded								
		☐ Check here if PTY has disbanded								
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
	(5) Report	t Identifiers								
Cove	ver Period: From 2 / 1 / 2020 To									
<u> </u>		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
	-	Monetary								
Casl	h & Checks \$, , <u>200</u> . <u>00</u>	Expenditures \$, , 0 . 00								
Loor	• • • • • • • • • • • • • • • • • • •	To a section Ass								
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$								
Tota	al Monetary \$, , 200 . 00	Office Account \$, , , 0 . 00								
lUta	il Monetary ,,,	Total Monetary \$, , 0 . 00								
In-Ki	ind \$, , 0.00	,, <u></u>								
111-171	ind	(8) Other Distributions								
		(8) Other Distributions \$, , 000_								
		· · · · · · · · · · · · · · · · · · ·								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$,, <u>200</u> 00	\$, , <u>0</u> . <u>00</u>								
	(44) 0-4									
	(11) Cert It is a first degree misdemeanor for any pers	tification son to falsify a public record (ss. 839.13, F.S.)								
Lo										
I certify that I have examined this report and it is true, correct, and complete:										
	ype name)	(Type name)								
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
Si	ignature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number								
	2/1/2020	2/29/2020						
(3) Cover Perio	od//	through	_ 1 1	(4) Pag	ge <u> </u>	of		
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount		
	tyre, Jeff Ray	S register		Description	zanendinent	\$200.0		
2/20/2020	***Protected Voter***	nurse						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name JEFFERY TYRE (2) I.D. Number 123										
(3) Cover Period	2/1/2020 : through	2/29/2020 //(4	4) Page <u>1</u>	of	0					
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)					
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount					
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