CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) RON WILLIAMS	OFFICE USE ONLY					
Name	ONLINE SUBMISSION [1206990]					
(2) 440 NW WINFIELD ST	Submitted on:					
Address (number and street) LAKE CITY, FL 32055	5/11/2020 11:39:46 (eastern)					
City, State, Zip Code						
Check here if address has changed	(3) ID Number: 1242					
(4) Check appropriate box(es):						
Candidate Office Sought: COUNTY COMMIS	SSION DIST 1					
Political Committee (PC) Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
Party Executive Committee (PTY)	Check here if PTY has disbanded					
Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed					
(5) Repor	t Identifiers					
Cover Period: From <u>4</u> / <u>1</u> / <u>2020</u> To	9 <u>4</u> / <u>30</u> / <u>2020</u> Report Type: <u>M4</u>					
☑ Original   ☐ Amendment   ☐ Sp	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
	Monetary					
Cash & Checks \$ , , 00	Expenditures \$ , , , 00					
Loans \$,,150.00	Transfers to					
	Office Account \$ _ , _ , _ 0 . 00					
Total Monetary \$,, <u>150</u> . <u>00</u>						
	Total Monetary \$ , , 0 . 00					
In-Kind $\qquad \qquad \qquad$						
	(8) Other Distributions					
	\$,, <u>0</u> . <u>00</u>					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$,, <u>150</u> . <u>00</u>	\$,, <u>0</u> . <u>00</u>					
(11) Co	tification					
(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)	(Type name)					
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)					
or decioneening connit.)						
X	<u>X</u>					
Signature	Signature					

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	RON WILLIAMS				(2) I.D. Number			
	4/1/2020							
(3) Cover Per	iod / /	thr	ough	11	(4) Page	e	of _1	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
4/2/2020 / /	Williams, Ronald W 440 NW Winfield Street Lake City, FL 32055		county commission er	LO	open campaign account		\$150.0	
4/2/2020 / /	Williams, Ronald W 440 NW Winfield Street Lake City, FL 32055	I	county commission er	IK	pay for qualifying petitions		\$7.8	
4/3/2020 / / 3	Williams, Ronald W 440 NW Winfield Street Lake City, FL 32055	I	county commission er	IK	pay qualifying petitions		\$1.3	
4/6/2020 / /	Williams, Ronald W 440 NW Winfield Street Lake City, FL 32055	I	county commission er	IK	refurbish old campaign signs		\$3,000.0	
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1 1	_							
1 1								
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name RON	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES         RON WILLIAMS       (2) I.D. Number       1242							
(3) Cover Period	4/1/2020 4 / through		4) Page <u>1</u>	of_	0			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount			
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