CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	RON WILLIAMS	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	440 NW WINFIELD ST	Submitted on:							
	Address (number and street) LAKE CITY, FL 32055	9/29/2020 15:14:07 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 1242							
(4)	Check appropriate box(es):	(b) 15 Number							
(4)	☐ Candidate Office Sought: COUNTY COMMIS	SION DIST 1							
	Political Committee (PC)								
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
	☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)	_ Check here if no other in or no reports will be med							
	(E) B								
Carre		Identifiers							
		7 / 10 / 2020 Report Type: P3							
	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$, , , 000	Monetary							
Loar	s , , ,	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 000	Total Monetary \$, , 2 . 00							
In-Ki	nd \$,, <u>0</u> .00								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,9, _49900	\$, <u>9</u> , <u>360</u> . <u>16</u>							
		tification on to falsify a public record (ss. 839.13, F.S.)							
Ιc	ertify that I have examined this report and it is true, corr	• • • • • •							
/ Ty	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
х		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	RON WILLIAMS		(2) I.D. Number								
	6/27/2020		7	/10/2020							
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	e <u>1</u>	of				
					Г	2					
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)				
(6)	(Last, Suffix, First, Middle)										
Sequence	Street Address &	Co	ontributor	Contribution	In-kind						
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount				
1											
1 1											
9 5											
1 1											
						3					
1 1											
1											
J I											
J I											
I = I											
*											
						*					
,											
1 1											

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ROI	N	WILL	IAMS	111						 (2	2) I.D. Nu	mber	1	L242	an an
		6/	27/2	020			7/10/	/202	0	•	~				
(3) Cover Peri	ioc	ı	1	1	th	rough	1		1	(4	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
6/30/2020	Columbia Bank, PO Box 1609	bank fee	MO	Add	\$2.00
1	Lake City, FL 32056				
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DS-DE 14 (Rev.	44(40.)				