	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Cynthia Smith	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	P.O. Box 9930	Submitted on:							
	Address (number and street)	7/27/2018 23:37:52 (eastern)							
	Jacksonville, FL 32208 City, State, Zip Code	<u> </u>							
		(2) ID Number 016							
	Check here if address has changed	(3) ID Number: 816							
(4)	Check appropriate box(es):	Dist. A							
		DIST 4							
	☐ 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							
	marviada making dissilonsoning communications)								
	(5) Report	Identifiers							
Cove	er Period: From $\frac{7}{2}$ / $\frac{7}{2018}$ To	7 / 20 / 2018 Report Type: P3							
X O	original Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Casl	h & Checks \$, 1,015.00	Expenditures \$, 1,094.83							
	0 00								
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$							
T.1.	I Monetary \$, 1 , 015 . 00	Office Account \$, , , 0 . 00							
rota	Monetary \$,1, 015 . 00	Total Monetary \$, 1 094 . 83							
In-Ki	ind \$, , 0.00	Total Monetary \$, 1 , 094 . 83							
111-131	,, <u></u>	(8) Other Distributions							
		\$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>17</u> , <u>494</u> . <u>19</u>	\$, <u>6</u> , <u>248</u> . <u>70</u>							
	(11) Cer	tification							
	It is a first degree misdemeanor for any pers								
I certify that I have examined this report and it is true, correct, and complete:									
(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
or	electioneering comm.)								
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	1		(2) I.D. Number						
	7/7/2018			7/20/	2018				
(3) Cover Peri	nd /	1	through	1	1	(A) Page	1	of	L

(5)	(7)	,	(8)	(9)	(10)	(11)	(12)
Date	Full Name		(C.)			1,0000	5 (1) 20 A
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
7/7/2018	Willbright , Ashley 525 Brockington Court	'I		CA			\$25.00
1	Jax, Fl 32225						
7/7/2018 / /	Olan, Ashleigh 133 Tatum Street Jax, Fl 32203	I		СН			\$25.00
2							
7/19/2018 / /	Rumlin , Isaiah P.O. Box 12263 Jax, Fl 32209	I		СН			\$100.00
3		÷					
7/19/2018 / /	Daniels Family Enterprise , Teresa	I	medical manager	СН			\$475.00
4	Jax, Fl 32208						
7/20/2018	Thomas, Dana 8025 Sierra Oaks Blvd Jax, Fl 32209	I	bcbs	СН			\$50.00
5	Tangan Mangua	I	retired	СН			\$240.00
7/20/2018 / /	Iceson , Marcus 842 Water St Jax, Fl 32218	Τ	recirea	Сп			\$240.00
6							
7/17/2018	Johnson, Nickkie 724 w 17th street jax, fl 32206	I	nurse	СН			\$100.00
7							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Cynthia Smith						_ (2) I.D. Nun	(2) I.D. Number			
	7/7/2	018	•	7/20/20)18		-			
(3) Cover Period	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
7/15/2018	DCAP Graphics , 3535 Saint Johns Bluff Jax, Fl 32225	printing material	MO		\$195.00
7/18/2018	Kessler Creative , 12276 San Jose Blvd #111 Jax, Fl 32223	direct advertising	МО		\$567.00
7/19/2018	Restaurant Depot , 3389 Powers ave Jax, Fl 32207	refreshments for volunteers	МО		\$177.83
7/18/2018	dcap Graphics, 3535 Saint Johns Bluff Jax, Fl 32225	printing material	МО		\$155.00
//					
11					
//					
/ /					