CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Sam Hall	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	P.O. Box 3									
	Address (number and street)	Submitted on: 8/9/2018 14:39:03 (eastern)								
	Atlantic Beach, FL 32233	(eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:850								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: School Board Dist 2 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 									
	(5) Report	Identifiers								
Cove	er Period: From 7 / 21_ / 2018 To	7 / 27 / 2018 Report Type: P4								
o [riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casł	n & Checks \$, ,2500	Monetary								
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , , 00	Total Monetary \$, , _1 . <u>47</u>								
In-Ki	ind \$,,,000									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>21</u> , <u>562</u> . <u>18</u>	\$, <u>11</u> , <u>964</u> . <u>88</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:										
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		x								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sam Hall			(2) I.D. Number						
	7/21/2018		7	/27/2018						
(3) Cover Per	iod / /	thro	ough	11_	(4) Pag	je <u>1</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	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount			
7/22/2018	Connelly, Michael 65 Tallwood Road Jacksonville Beach, FL 3225	I		СН		Delete	\$50.0			
1										
7/22/2018	Connelly, Michael 65 Tallwood Road Jacksonville Beach, FL 3225	I 50		СН		Add	\$25.0			
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sam	Sam Hall								nber	850		
	7/2	1/2	018		7/27/2	018						
(3) Cover Period	d	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
7/27/2018	Stripe.com, Stripe.com 185 Berry Street Suite 550 San Francisco, CA 94107-9105	credit card fees	МО	Delete	\$33.95
7/27/2018	Stripe.com, Stripe.com 185 Berry Street Suite 550	credit card fees	MO	Add	\$32.48
2	San Francisco, CA 94107-9105				
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