CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Tony Cummings	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION [1182585]								
(2)	14286-19 Beach Blvd. # 115	Submitted on:								
	Address (number and street)	1/15/2019 11:55:54 (eastern)								
	Jacksonville, FL 32250									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:809								
(4)	Check appropriate box(es):									
	☐ Candidate Office Sought: Sheriff									
	Political Committee (PC)	Charlebon KBO on FOO bon disharded								
	☐ 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	☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
(5) Report Identifiers										
Cove		12 / 31 / 2018 Report Type: M12								
		ecial Election Report								
		<u> </u>								
(6)	Contributions This Report	(7) Expenditures This Report								
	¢ 0.00	Monetary Expanditures To 0.0								
Cast	h & Checks \$,,,000	Expenditures \$, ,579 . 02								
Loar	ns \$, , 0.00	Transfers to								
Loai	, <u> </u>	Office Account \$, , 0 . 00								
Tota	I Monetary \$, , 0 . 00									
		Total Monetary \$, , -579. 02								
In-Ki	ind \$, , 0.00									
		(8) Other Distributions								
		\$,, <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
(3)	\$, 53 , 175 . 00	\$								
	, <u>JJ</u> , <u>17J</u> , <u>00</u>	, <u>JI</u> , <u>IIJ</u> . <u>JU</u>								
		tification								
	It is a first degree misdemeanor for any pers	on 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:										
(T	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	Tony Cummings			(2) I.D. Number809						
	12/1/2018		1	2/31/2018		-	•			
(3) Cover Perio	od//	thro	ough	11	(4) Pag	e	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			
f f										
1 1										
1 1										
f f										
f f										
J I										
J I										
J I										

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Tony	Cumming	s				_ (2)	I.D. Nun	nber	8	309	
	12/1/20)18		12/31/2	2018						
(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
12/26/2018	Supervisor of Elections Office, 105 East Monroe St Jacksonville, Fl 32202	qualifying fee	MO	Delete	\$10,758.38
12/26/2018	Supervisor of Elections Office, 105 East Monroe St Jacksonville, Fl 32202	qualifying fee	МО	Add	\$10,179.36
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