	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Lake Ray	OFFICE USE ONLY								
, ,	Name	ONLINE SUBMISSION								
(2)	8729 Ft. Caroline Rd.	Submitted on:								
	Address (number and street)	6/9/2018 16:53:04 (eastern)								
	Jacksonville, FL 32277 City, State, Zip Code	` `								
	_	(0) 15 11 1								
	Check here if address has changed	(3) ID Number: 852								
(4)	Check appropriate box(es):									
	☐ Candidate Office Sought: Tax Collector ☐ Political Committee (PC)	2								
	☐ 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								
	muvidual making electioneering communications)									
	(5) Repor	t Identifiers								
Cove	er Period: From $\underline{6}$ / $\underline{1}$ / $\underline{2018}$ To	9 / <u>30</u> / <u>2018</u> Report Type: <u>TR1</u>								
X O	riginal Amendment Sp	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$, , ,000	Monetary								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00								
Total Monetary \$, , 0 . 00		Total Monetary \$, <u>111</u> , <u>310</u> . <u>00</u>								
In-Ki	nd \$, , 0 . 00									
		(8) Other Distributions								
		\$,,000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>111</u> , <u>310</u> . <u>00</u>	\$, <u>111</u> , <u>310</u> . <u>00</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:										
/ Tv	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		x								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Lake Ray				2) I.D. Numbe	er8	52
	6/1/2018 od///	thro	ough	/30/2018 ///	(4) Pag	e	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
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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	Lake	Ray							 (2) I.D. Num	ber_	8	352	and and
		6/1/	20	18		9/3	0/2	018					
(3) Cover Po	eriod	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
6/1/2018	Lake Ray Campaign, 8729 Fort Caroline Road Jacksonville, FL 32277	transfer to 2018 special election.	DF		\$111,310.00
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