CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Joyce Morgan	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	4928 Toproyal Lane	Submitted on:							
	Address (number and street)	10/1/2018 11:08:54 (eastern)							
	Jacksonville, FL 32277 City, State, Zip Code								
		(2) 17 11							
	Check here if address has changed	(3) ID Number: 911							
(4)	Check appropriate box(es):								
	Candidate Office Sought: City Council	District 1							
	 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
(5) Report Identifiers									
Cove	er Period: From 8 / 1 / 2018 To	8 / 31 / 2018 Report Type: M8							
По		ecial Election Report							
	Contributions This Report								
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$, , , 0 . 00	Monetary							
Loar	s \$,, <u>0</u> .00	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 0 . 00	Total Monetary \$, , -100. 00							
In-Ki	nd \$, , 0.00								
		(8) Other Distributions							
		\$,, <u>0</u> 0							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>15</u> , <u>697</u> . <u>39</u>									
	(11) Cert It is a first degree misdemeanor for any pers	ification 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	3		s	z) I.D. Numbe	·r9	11
	8/1/2018	8	3/31/2018		1	0
(3) Cover Perio	od / /	through	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
Number	City, State, Zip Code	Type Occupation	туре	Description	7 arienament	Amount
1 1						
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f I						
1 1						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joyce	Morgan					(2) I.D. Num	ber	9	911	3
	8/1/20)18		8/31/20	018	~ ~				
(3) Cover Period	I	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
8/24/2018	Walgreens, 6006 Beach Blvd Jacksonville, FL 32216	pictures	PS	Add	\$5.17
8/24/2018	Walgreens, 6103 Fort Caroline Rd Jacksonville, FL 32277	pictures	PS	Add	\$16.34
8/31/2018	Danford, Joyce M 4928 Top Royal Lane Jacksonville, FL 32277	campaign supplies	PW	Delete	\$100.00
8/31/2018	Danford, Joyce M 4928 Top Royal Lane Jacksonville, FL 32277	campaign supplies	PW	Add	\$0.00
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