	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Mike Hogan	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	5007 Eagle Point Dr.	Submitted on:					
	Address (number and street)	1/10/2019 16:32:53 (eastern)					
	Jacksonville, FL 32244						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 929					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: Supervisor of	Elections					
	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					
		☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	dentifiers					
Cove	er Period: From 12 / 1 / 2018 To	12 / 31 / 2018 Report Type: <u>M12</u>					
X O	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
	· ·	Monetary					
Casl	h & Checks \$, , <u>100</u> . <u>00</u>	Expenditures \$, , 0 . 00					
	•						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to					
		Office Account \$, , , 0 . 00					
Tota	al Monetary \$, , <u>100</u> . <u>00</u>						
		Total Monetary \$, , 0 . 00					
In-Ki	ind \$,, <u>0</u> .00						
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(3)		\$, , 0.00					
	\$, <u>, 100</u> . <u>00</u>	Ψ , ,					
	(11) Cert	tification					
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)							
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:					
	(Turn and a)						
-	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		X					
	ignature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Mike Hogan		(2) I.D. Number 929					
	12/1/2018		1	2/31/2018				
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	e <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	
12/11/2018	Hogan, Mike 5007 Eagle Point Drive	S		СН	2000, 1000		\$100.0	
1	Jacksonville, Fl 32244							
J I								
1 1								
f I								
1 1								
f f								
1 1								
J I								
DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR	NSTRUCTIONS	S AND CODE VALU	UES		

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Mike	Mike Hogan				(2) I.D. Number				929	
(3) Cover Period	12/1/201	.8 _/throug	100	31/2018	(4	1) Page	1	of	0	
(5)		(7)		(8)		(9)	T	(10)	(11)	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
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DS DE 1/ /Pov					