CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Stacy Kirvin	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1170441]						
(2) 142 Deer Patch Rd	Submitted on:						
Address (number and street) Apalachicola, FL 32320	8/26/2018 16:37:05 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 174						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>School Board Member Dist. 4</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) 							
(5) Report Identifiers							
Cover Period: From <u>8</u> / <u>11</u> / <u>2018</u> To	8 / 23 / 2018 Report Type:7						
☑ Original	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$, , <u>181</u> . <u>90</u>						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,0 00						
Total Monetary \$	Total Monetary \$,, <u>181</u> . <u>90</u>						
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>1</u> _, <u>394</u> . <u>34</u>	\$,,74_						
(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:							
(Type name)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	X						
Signature	Signature						

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number					
	8/11/2018			8/23/2018					
(3) Cover Perio	od / /	thro	ough	I I	(4) Page	e <u>1</u>	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1 1									
1 1									
1 1									
1 1									
1 1									
1 1									
1 1	-								
/ /									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Stac	CAMPAIGN TREASURER'	(2	EXPENDIT 2) I.D. Number	174	
	8/11/2018 I <i>I</i> through_	8/23/2018	4) Page <u>1</u>	of_	1
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
	Hook, Focus 29 Island Drive Unit 4 Eastpoint, FL 32328	cards	МО		\$181.90
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_ / /					
_/ /					
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//					
11					
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DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES