	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Mary Brock	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	28 Quail Court	Submitted on:					
	Address (number and street)	5/9/2018 12:54:10 (eastern)					
	Havana, FL 32333 City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 174					
(4)	_	(3) 1D Number					
(4)	Check appropriate box(es): Candidate Office Sought: School Board	District 2					
		DISCITCE 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					
	marriada marrig dissasirissinig seminamearene,						
	(5) Report	Identifiers					
Cove	er Period: From $\frac{4}{2}$ / $\frac{1}{2}$ / $\frac{2018}{2018}$ To	4 / 30 / 2018 Report Type: M4					
X O	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
	_	Monetary					
Cash	h & Checks \$, , <u>100</u> . <u>00</u>	Expenditures \$, , _14 . 10					
Loar	ns \$, , 0.00	Transfers to					
Luai	,,	Office Account \$, , 0 . 00					
Tota	I Monetary \$, , 100 . 00	, , , , <u></u> , <u></u> , <u></u>					
		Total Monetary \$, , 14 . 10					
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					
\	\$, , 200 . 00	\$, , 29 10_					
		dification					
	It is a first degree misdemeanor for any pers						
Ιc	certify that I have examined this report and it is true, corr	ect, and complete:					
_(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Mary Brock				2) I.D. Numbe	er1	74
	4/1/2018		4	/30/2018			
(3) Cover Perio	od//	thro	ough	<i>l l</i>	(4) Pag	je	of
	1	T		Y .		T	,
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind	***************************************	* -2000000-200000 *
Number	City, State, Zip Code Lockett, Ida	Туре	Occupation retired	Type CH	Description	Amendment	Amount \$100.0
4/5/2018	P.o. Box		educator	CH			\$100.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _M	ary	Brock		111					 (2) I.D. Nun	nber		174	
		4/1	/20	18			4/30/2	2018					
(3) Cover Pe	eriod		1	1	throu	ah 💮	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
4/5/2018	Supervisor of Lee tions, 16 South Madison Street Quincy , Fl 32351	verifying petitions	МО		\$6.50
4/11/2018	Supervisor of elections, 16 South Madison Street Quincy, F1 32351	verifying petitions	MO		\$2.60
4/6/2018	Supervisor of elections, 16 South Madison Street Quincy, Fl 32351	list of registered voters	МО		\$5.00
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