CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Lynn Gray	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	5820 Better Orange Ave	Submitted on:						
	Address (number and street)	5/11/2020 22:18:42 (eastern)						
	Tampa, FL 33625							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1802						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: School Board	Member, Dist. 7						
	Political Committee (PC)							
	☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
	☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
		Identifiers						
Cove	er Period: From $\frac{4}{2}$ / $\frac{1}{2}$ / $\frac{2020}{2}$ To	4 / 30 / 2020 Report Type: <u>M4</u>						
0	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , 0 . 00						
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 0 . 00	, , , <u> </u>						
. 010		Total Monetary \$, , 0 . 00						
In-Ki	nd \$, , 0.00	,, ,, ,, ,						
		(8) Other Distributions						
		\$, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>17</u> , <u>700</u> . <u>35</u>	\$, <u>4</u> , <u>349</u> . <u>80</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:								
(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 Lynn Gray (2) I.D. Number 1802						802	
	4/1/2020 od////	thro	ough	/30/2020 ///	(4) Pag	e	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9) Contribution	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	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 Lynn Gray (2) I.D. Number 1802										
	4/1/2020 4/3 /through	0/2020	l) Page <u>1</u>		0					
(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)	(11) Amount					
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