	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Indian River Conservatives for Bette:	ONLINE SUBMISSION								
(2)	3820 8th Lane; PO Box 7111	[1176974]								
	Address (number and street)	Submitted on: 10/19/2018 21:25:23 (eastern)								
	Vero Beach, FL 32961									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:299								
(4)	Check appropriate box(es):									
	☐ Candidate       Office Sought:         ☐ Political Committee (PC)       ☐ 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									
(5) Report Identifiers										
		10 / 12 / 2018 Report Type: <u>G5</u>								
M O	riginal Amendment Sp	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$ , , ,000	Monetary								
Loar	<del></del> _ <del></del>	Transfers to Office Account \$ , , , 0 . 00								
Total Monetary \$		Total Monetary \$ , , 0 . 00								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$ , , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>24</u> , <u>676</u> . <u>26</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-	(Type name)									
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		X								
	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Indian River Conse	rvati	ves for Be	etter Scho	2) <sub>s</sub> I.D. Numbe	er	99
	10/6/2018		1	0/12/2018		1	
(3) Cover Perio	od / /	thro	ough	11_	(4) Pag	e	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)  Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11)	(12)
/ /	eny, etate, zip eeue	1,500	- Состраноп	.,,,,,			yunoani
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Indian	River	Cons	servatives	for	Better	Schools	(2) I.D. Nun	nber	2	299	3
	1	0/6/20	18		10/	12/201	8		-			
(3) Cover Per	riod	1	1	through		1 1		(4) Page	1	of	0	

(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
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DS-DE 14 (Rev.	4440 %	+			·