

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Marion McCray
 Name

(2) 300 SE Wayfare RD
 Address (number and street)

Mayo, FL 32066
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1266665]

Submitted on:
 7/1/2022 11:33:57 (eastern)

Check here if address has changed (3) ID Number: 81

(4) Check appropriate box(es):

Candidate Office Sought: School Board District 3

Political Committee (PC)

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

(5) Report Identifiers

Cover Period: From 6 / 18 / 2022 To 7 / 1 / 2022 Report Type: P2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 300 . 36

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 300 . 36

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 4 , 000 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 3 , 212 . 11

(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) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Marion McCray (2) I.D. Number 81

6/18/2022 through 7/1/2022

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(5) Date	(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) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Marion McCray

(2) I.D. Number 81

(3) Cover Period 6/18/2022 through 7/1/2022

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
6/23/2022 //	Supervisor of Elections, P. O. Box 76 Mayo, FL 32066	printing absentee labels	MO		\$10.36
1					
6/23/2022 //	U. S. Postal service, 157 E Main Street Mayo, FL 32066	stamps for mailing absentee letters	MO		\$290.00
2					
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