

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MICHAEL "COACH RAY" QUALLS
 Name

(2) PO BOX 1116
 Address (number and street)

LEHIGH ACRES, FL 33970
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1238255]

Submitted on:
 11/5/2020 17:09:31 (eastern)

Check here if address has changed

(3) ID Number: 1554

(4) Check appropriate box(es):

- Candidate Office Sought: SHERIFF
- 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 1 / 1 / 2020 To 1 / 31 / 2020 Report Type: 20M1

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 \$, , 9 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 9 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 28 , 477 . 60

(10) TOTAL Monetary Expenditures To Date

\$, 26 , 412 . 60

(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 MICHAEL "COACH RAY" QUALLS (2) I.D. Number 1554

1/1/2020 through 1/31/2020

(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 MICHAEL "COACH RAY" QUALLS

(2) I.D. Number 1554

(3) Cover Period 1/1/2020 through 1/31/2020

(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					
1/22/2020 / /	bank, sun trust 1110 home stead rd north lehigh acres, fl 33936	acct analysis fee	MO	Add	\$9.00
1					
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