	CAMPAIGN TREASURE	R'S REPORT SUMMARY									
(1)	Dianne Williams-Cox	OFFICE USE ONLY									
	Name	ONLINE SUBMISSION [1180276]									
(2)	1563 Capital Circle SE #157	Submitted on:									
	Address (number and street)	11/23/2018 22:13:19 (eastern)									
	Tallahassee, FL 32301										
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number:513									
(4)	Check appropriate box(es):										
	<ul> <li>☐ Candidate Office Sought: Tallahassee City Commission - Seat 5</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>										
	(5) Report	Identifiers									
Cove	er Period: From <u>10</u> / <u>13</u> / <u>2018</u> To	10 / 19 / 2018 Report Type: <u>G6</u>									
	riginal Amendment Spe	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Casl	n & Checks \$ , , , 000	Monetary									
Loar		Transfers to Office Account \$ , , , 0 . 00									
Tota	I Monetary \$ , , ,0 . <u>00</u>										
In-Ki	and \$,, <u>0</u> .00	Total Monetary \$ , , 0 . 00									
		(8) Other Distributions \$ , , 000_									
(9)	<b>TOTAL Monetary Contributions To Date</b> \$	(10) TOTAL Monetary Expenditures To Date \$ ,31_ ,34295_									
(T	(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										
X		X Simulatura									
Si	gnature	Signature									

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	anne Willi	ams-Cox	<	(2) I.D. Number							
		10/19	/2018								
(3) Cover Period	I	1	through	1	1	(4) Page	1	of	1		

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10/15/2018	Democratic Womens Club of FL, 15346 Ponce De Leon In Clermont, FL 34714	В	political committee	СН		Delete	\$150.0
10/15/2018	Democratic Womens Club of FL, 15346 Ponce De Leon Ln Clermont, FL 34714	С	political committee	СН		Add	\$150.0
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _				ζ		58 N N		(2) I.D. Nun	A 100	3.50 PM	513	
(3) Cover P	eriod _	10/13/	2018	through_	10/19/	2018 /		(4) Page	1	of _	0	
r	70				- T		***			T		200

(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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