CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Terance Reed	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1154852]						
(2) 14251 NW 40th Ave Address (number and street)	Submitted on:						
Chiefland, FL 32626	5/10/2018 12:15:36 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 240						
(4) Check appropriate box(es):							
Image: Second construction County Commission Dist. 2 Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Check here if PC or ECO 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 <u>4</u> / <u>1</u> / <u>2018</u> To	4 / <u>30</u> / <u>2018</u> Report Type: <u>M4</u>						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$, , , 6 . <u>50</u>						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,0.00						
Total Monetary \$	Total Monetary \$, , , 6 . 50						
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,,0.	\$,, <u>11</u> . <u>50</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:							
(Type name)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Terance Reed (2) I.D. Number 240					.40	
	4/1/2018	4/30/2018					
(3) Cover Perio	od/ /	thro	- bugh	1 1	(4) Pag	e ¹	of ⁰
			0.00	, <u> </u>	, .	2	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name				2000 100 000	200122 2002	3 3 0020 - 1 3
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Tera	CAMPAIGN TREASURER'	-		EXPENDITURES 2) I.D. Number		
(3) Cover Period	4/1/2018 I/ _/through_	4/30/2018 //	(4) Page <u>1</u>	of	1	
(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) Amendment	(11) Amount	
	Levy Co Supervisor of Election, 421 s court street bronson, fl 32621	petition fees	MO		\$6.50	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES