	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	DONNIE PROPHET	OFFICE USE ONLY					
` ,	Name	ONLINE SUBMISSION [1148279]					
(2)	5001 SW 20TH ST APT 3807	Submitted on:					
	Address (number and street)	1/17/2018 12:19:08 (eastern)					
	OCALA, FL 34474						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 402					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: SCHOOL BOARD	- 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	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	dentifiers					
Cove	er Period: From $12 / 1 / 2017$ To	12 / 31 / 2017 Report Type: M12					
По		ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(0)	Contributions This Report						
Cock	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , 0 . 00					
Casi	1 & Checks						
Loar	ns \$, , 0.00	Transfers to					
		Office Account \$, , 0 . 00					
Tota	I Monetary \$, , 0 . 00						
		Total Monetary \$, , 0 . 00					
In-Kind \$, , 75.00							
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, ,, 0 . 00	\$, ,, 0 . 00_					
		tification on to falsify a public record (ss. 839.13, F.S.)					
1		• • • • • •					
I certify that I have examined this report and it is true, correct, and complete:							
_(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	DONNIE PROPHET		(2) I.D. Number 402				
	12/1/2017						
(3) Cover Per	iod / /	thro			(4) Page	1	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
12/8/2017	Oliver , Natasha Y 560 NW 56th Ave Ocala, FL 34482			IK		Add	\$75.0
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(1) Name <u>DONNI</u>	URES 402				
	12/1/2017 12/ / / through	31/2017	1) Page1		0
(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)	(11)
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