	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Lori Conrad	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION								
(2)	6600 SE 36th Ave	[1222750]								
	Address (number and street)	Submitted on: 8/4/2020 09:49:37 (eastern)								
	Ocala, FL 34480									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:506								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: SCHOOL BOARD - 1</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</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 7 / <u>25</u> / <u>202</u> 0 To	7 / <u>31</u> / <u>2020</u> Report Type: <u>P6</u>								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$ , , _50 . 00	Monetary								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$ , , 5000	Total Monetary \$ , , 2 . 30								
In-Ki	nd \$,, <u>240</u> . <u>00</u>									
		(8) Other Distributions \$ , , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>22</u> , <u>609</u> . <u>59</u>	\$, <u>17</u> , <u>305</u> . <u>82</u>								
_(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)  (Type name)									
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
Sig	gnature	Signature								

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

(1) Name	Lori Conrad	200	(2) I.D. Numbe	F	506	
(3) Cover Perio	7/25/2020 od////	through	/31/2020 ///	(4) Pag	e <u>1</u>	of
(5)	(7)	(8)	(9)	(10)	(11)	(12)

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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Sequence Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
7/25/2020	McCammon, Julee ***Protected Voter***	I	Cocapation	СН	Doscription		\$50.00
1							
7/25/2020 / /	Ellis, Cynthia 1808 Southeast 7th street Ocala, Fl 34471	I	business	IK	monies for logo tshirts		\$240.00
2							
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1 1							
1 1							
1 1							,
						J.	

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Lori	Conrad					 (2) I.D. Nur	nber	5	506	
		7/25/	2020		7/31/20	020	**	-			
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	1	

(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
7/27/2020	Anedot, anedot.com Ocala, Fl 34471	bank fee	MO		\$2.30
1				5	
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