

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YES FOR MARION SCHOOLS  
 Name  
 (2) 50 SE 16TH AVE  
 Address (number and street)  
OCALA, FL 34471  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1176229]

Submitted on:  
 10/15/2018 11:16:53 (eastern)

Check here if address has changed

(3) ID Number: 418

(4) Check appropriate box(es):

- Candidate Office Sought: \_\_\_\_\_
- 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 9 / 15 / 2018 To 9 / 28 / 2018 Report Type: G3

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      \$        ,        , 0 . 00

Transfers to Office Account      \$        ,        , 0 . 00

Total Monetary      \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 13 , 816 . 01

### (10) TOTAL Monetary Expenditures To Date

\$        , 13 , 816 . 01

### (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** YES FOR MARION SCHOOLS **(2) I.D. Number** 418  
**(3) Cover Period** 9/15/2018 through 9/28/2018 **(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
/      /							
/      /							
/      /							
/      /							
/      /							
/      /							
/      /							
/      /							
/      /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name YES FOR MARION SCHOOLS

(2) I.D. Number 418

(3) Cover Period 9/15/2018 through 9/28/2018

(4) Page 1 of 0

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					