	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Megan C. Harding	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	10028 Grove Drive	Submitted on:								
	Address (number and street)	8/3/2018 12:18:53 (eastern)								
	Port Richey, FL 34668 City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number: 995								
(4)	_	(9) ID Number.								
(*)	(4) Check appropriate box(es): □ Candidate Office Sought: School Board Member District 5 □ 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								
Cove	er Period: From 7 / 21 / 2018 To	7 / 27 / 2018 Report Type: P4								
X O		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
	h & Checks \$, , 0 . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
	Il Monetary \$,,,	Total Monetary \$, , , 0 . 00								
In-Ki	ind \$,1 , <u>562</u> . <u>66</u>									
		(8) Other Distributions \$, , <u>0</u> 00								
(9)	TOTAL Monetary Contributions To Date \$,13 , _52000	(10) TOTAL Monetary Expenditures To Date \$,6_,75044_								
(Ty	(11) Cert It is a first degree misdemeanor for any person certify that I have examined this report and it is true, corre Type name) Individual (only for IE	con to falsify a public record (ss. 839.13, F.S.) rect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)								
<u>X</u>	ignature	X Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Med	gan C. Har	ding		(2) I.D. Number 995							
	7/21/20	18		7/27/	2018						
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1		

(3) Cover Perio	od//		ough	<i>l l</i>	(4) Pag	je <u> </u>	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C ₁	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
7/27/2018	Harding, Megan 10028 Grove Dr. Port richey, FL 34668		teacher	IK	sign post and screws		\$167.4
7/26/2018	Harding, Megan 10028 Grove Dr. Port richey, FL 34668	S	teacher	IK	robo call advertisin g		\$1,395.2
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DS-DF 13 (Rev. 11/1	1				S AND CODE VAL	1222	

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Megan	C.	Hard	ing	5 0000000000000000000000000000000000000	9922009 1210300	Permittee degricolog	10 99 11	77.000	(2) I.D. Nun	nber	3245 J. S.	9	95	200
(3) Cover F	Period _	7/	21/20)18 /	through_	7/2	27/20 _/)18 /_		(4) Page	1	of	9	0	

(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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