	CAMPAIGN TREASURE	R'S REPORT SUMMARY			
(1)	Sandra Gilyard	OFFICE USE ONLY			
•	Name	ONLINE SUBMISSION			
(2)	PO Box 465	Submitted on:			
	Address (number and street)	5/3/2019 11:23:23 (eastern)			
	San Mateo, FL 32187  City, State, Zip Code				
		(2) 12.11			
	Check here if address has changed	(3) ID Number:335			
(4)	Check appropriate box(es):				
	☐ Candidate Office Sought: School Board	Dist 3			
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ 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			
	Individual making elections sing communications,				
	(5) Report	dentifiers			
Cove	er Period: From $\frac{4}{2}$ / $\frac{1}{2}$ / $\frac{2019}{201}$ To	4 / 30 / 2019 Report Type: M4			
✓ Original					
(6)	Contributions This Report	(7) Expenditures This Report			
		Monetary			
Cash	h & Checks \$ , , ,000	Expenditures \$ , , 0 . 00			
487 on on	•				
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$			
Tota	\$ 0.00	Office Account \$ , , , 0 . 00			
TUla	Il Monetary \$ , , , 0 . 00	Total Monetary \$ , 0.00			
In-Ki	ind \$ , , 35 . 00	,,,			
III-i Xi	iiu , ,	(8) Other Distributions			
		\$,,000_			
(0)					
(9)	TOTAL Monetary Contributions To Date \$ , , 0 . 00	(10) TOTAL Monetary Expenditures To Date \$			
	\$ , , <u>0</u> . <u>00</u>	\$ , , <u>0</u> . <u>00</u>			
	(11) Cert	tification			
	It is a first degree misdemeanor for any person	on to falsify a public record (ss. 839.13, F.S.)			
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:			
(T	ype name)	(Type name)			
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)			
х		X			
	gnature	Signature			

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number				
4/1/2019		4/30/2019					
(3) Cover Perio	od//	thro			(4) Page	1	of <sup>1</sup>
1006 98			1000				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind	10 <b>1</b> 0000000000000000000000000000000000	•
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
4/28/2019	Gilyard, Sandy PO Box 465	S		IK	printing petitions		\$35.0
J I	San Mateo , FL 32187				and		
-					envelopes		
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1 1							
	1				1		

DS-DE 13 (Rev. 11/13 ) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Sandra Gilyard (2) I.D. Number 335					
(3) Cover Period		00/2019 <u>/ /</u> (4	4) Page <u>1</u>	of_	0
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
//					
//					

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DS-DF 14 (Rev	11/13