CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Carol A. Hilson	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION [1120823]							
(2)	3003 S.E. Galt Circle	Submitted on:							
	Address (number and street)	8/17/2016 15:03:06 (eastern)							
	Port St. Lucie, FL 34984								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 273							
(4)									
	Candidate Office Sought: School Board,	District 2							
	☐ 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 Identifiers									
Cove	er Period: From 8 / 6 / 2016 To	8 / 12 / 2016 Report Type: P6							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	n & Checks \$, , 100 . 00	Expenditures \$, , 0 . 00							
Loar	s \$,, <u>0</u> .00	Transfers to							
	•	Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , <u>100</u> . <u>00</u>	T talk and a second							
	•	Total Monetary \$, , 0 . 00							
In-Kind \$, , 0 . 00									
		(8) Other Distributions							
		\$, , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$	\$, <u>1</u> , <u>028</u> . <u>78</u>							
	(11) Cert It is a first degree misdemeanor for any pers	tification on to falsify a public record (ss. 839.13. F.S.)							
١c									
I certify that I have examined this report and it is true, correct, and complete:									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
v		v							
X Sie	gnature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number						er	273		
	8/6/2016		8/12/2016						
(3) Cover Peri	od / /	thro	ough	11	(4) Pag	le	of		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
8/7/2016 / /	Jones, Thomas 9612 Crooked Stick Lane PSL., Fl 34986	I		СН			\$100.0		
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Carol A. Hilson (2) I.D. Number 273									
	8/6/2016 { /through	3/12/2016	l) Page <u>1</u>		0				
(5) Date (6) Sequence	(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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