	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Kerry Lyons	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	6195 Secret Lake Dr.	Submitted on:							
	Address (number and street)	9/17/2018 13:26:34 (eastern)							
	Port Orange, FL 32128								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:504							
(4)	Check appropriate box(es):								
	Candidate Office Sought: School Board	Member, District 3							
	Political Committee (PC)	☐ Check here if PC or ECO has disbanded							
	☐ Electioneering Communications Org. (ECO) ☐ 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		12 / 31 / 2018 Report Type: TRP							
X O		ecial Election Report							
		<u> </u>							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$ , , 0 . 00	Monetary Expenditures \$ , , 25 . 82							
Loar	ns \$,,,000	Transfers to							
		Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , , 000								
	•	Total Monetary \$ , , _25 . 82							
In-Ki	find \$,,,000								
		(8) Other Distributions							
		\$ , , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
. ,	\$ , 6,000.00	\$, _ 6 , _00000_							
	(11) Cert It is a first degree misdemeanor for any pers								
I certify that I have examined this report and it is true, correct, 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	Kerry Lyons				2) I.D. Numbe	r5	04
	1/1/2017		1	2/31/2018			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	<b>a</b>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13 ) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name _K	Cerry	Lyons					(2) I.D. Numbe	er	5	504	
		1/1/20	017		12/31/	2018					
(3) Cover Pe	eriod	I	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
9/17/2018	lyons, kerry 6195 secret lake drive port orange, fl 32128	end campaign. end fund. return	МО		\$25.82
1		\$25.82 to principal			
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			,		35
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DS-DE 14 (Rev.	11/12 }				7.3.1

## **CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS**

504

(1) Name	Kerry Lyons		(2) I.D. Numb	per504	
(3) Cover Perio	d1/1/2017through12/	31/2018	(4) Page	1 of _	1
(5) Date (6) Sequence Number	(7)  Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10)	(11)
9/8/2018	Bank of America, 6195 secret lake drive port orange, fl 32128	TO	end of campaign reports.th e \$25.82 transferre d back to		\$25.82
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