	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Linda Hyatt	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	446 E. Halifax Ave.	Submitted on:					
	Address (number and street) Oak Hill, FL 32759	9/6/2018 14:06:42 (eastern)					
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 536					
(4)	Check appropriate box(es):	(5) 15 114111501.					
(4)	 ☑ Candidate Office Sought: Oak Hill Comm: 	ission Seat 1					
	Political Committee (PC)	IBBION BEACT					
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
	☐ Party Executive Committee (PTY) [☐ Independent Expenditure (IE) (also covers an [☐ Independent Expendent	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)	_ Clieck liele if the other in of ne reports will be filed					
	(5) Pour et						
Cove		Identifiers Out / 2.1 / 2.0.1.0 Percet Type: C1					
		8 / 31 / 2018 Report Type: G1					
<u>N</u> ∪	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	h & Checks \$, , <u>100</u> . <u>00</u>	Monetary					
Loar	s,,,	Transfers to Office Account \$, , 0 . 00					
Total Monetary \$, , <u>100</u> . <u>00</u>		Total Monetary \$, , 0 . 00					
In-Ki	ind \$, , 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>175</u> . <u>00</u>	\$, , <u>930</u> . <u>82</u>					
	(11) Cert	rification					
	It is a first degree misdemeanor for any person						
Ιc	I certify that I have examined this report and it is true, correct, and complete:						
	ype name)	(Type name)					
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
X		X					
Sig	ignature	Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

	AINI AION INLAGON	LIXO	KLI OKI -		CONTRIBOT	IONO	
(1) Name	Linda Hyatt				2) I.D. Numbe	er5	36
(3) Cover Peri		3/31/2018 //	(4) Pag	(4) Page1			
(5) Date	(7)		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
8/30/2018 / /	Murdock, Pam 1540 Noble St. Logwood Fl, Fl 3750		retired	CA	Description		\$50.0
8/30/2018	Davis, Suzanne C.	I	retired	CA			\$50.0
2	4503 Fontana Street Orlando, Fl 32807						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

	Linda Hyatt			(2) I.D. Number			536	
(3) Cover Period	8/24/2018	8/31 through/	/2018	(4) I	Page <u>1</u>	of	0	_
(E)	(7)		(8)	T	(9)	(10)	(11)	_

(5)	(7)	(8)	(9)	(10)	(11)
Date (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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DS DE 1/ /Pov					