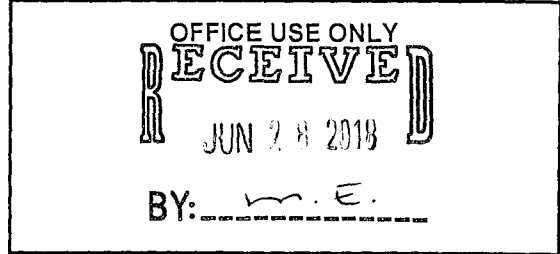


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) John Tucker
Name

(2) 1826 Overlook Dr
Address (number and street)

Mount Dora FL 32757
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Mount Dora City Council Dist 2
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 04 / 01 / 18 To 06 / 22 / 18 Report Type: P-1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 200.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, 200.00

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, _____, 00

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, _____, 00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 450.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 61.10

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) John Tucker

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X John Tucker
Signature

(Type name) John Tucker

Candidate Chairperson (only for PC and PTY)

X John Tucker
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Tucker (2) I.D. Number _____

(3) Cover Period 06 / 01 / 18 through 06 / 22 / 18 (4) Page ONE of ONE

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
06 / 07 / 18	Michael Moecker		R	check			\$110.00
ONE	2233 Outlook Dr Mount Airy 32787						
06 / 07 / 18	Michael Zealy		R	check			\$100.00
TWO	2225 Outlook Dr Mount Airy NC 32787						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Tucker (2) I.D. Number _____

(3) Cover Period 06/01/18 through 06/01/18 (4) Page _____ of _____

(5) Date	(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) Amendment	(11) Amount
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No Expenditures