CAMPAIGN TREASU	RER'S REPORT SUMMARY			
(1) Jim Richards For Ca	C >			
Name	OFFICE USE ONLY			
(2) P.O. Box 1336	RECEIVED			
Address (number and street)	AUG n 2 2018			
City, State, Zip Code				
Check here if address has changed	CITY OF MARCO ISLAND			
(4) Check appropriate box(es):	(3) ID Number:			
Candidate Office Sought: 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			
Cover Period: From 1/21/18 T	ort Identifiers  O 7 / 27 / 28 Report Type: 2018 P			
(6) Contributions This Report				
Cash & Checks \$,,	(7) Expenditures This Report  Monetary  Expenditures \$,,			
Total Monetary \$,,	Transfers to Office Account \$			
n-Kind \$	Total Monetary \$			
	(8) Other Distributions			
9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date			
It is a first degree misdemeaner for any	rtification			
I certify that I have examined this report and it is true, cor	son to faisify a public record (ss. 839.13, F.S.)			
(Type name) Treasurer Deputy Treasurer	(Type name) Candidate Chaliperson (only for PC and PTY)			
Signature X Signature				
Signature				

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Jon Ky chards For Oty Coural LD. Number								
(1) Name 5, m Kichards For Ctty Cource (2) I.D. Number  (3) Cover Period 7 / 2 / 18 through 7 / 27 / 18 (4) Page of								
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)	(9)	(10)	(11)	(12)		
1 1	Only, State, 210 Code	Type Occupation	Туре	Description	Amendment	Amount		
1 1						2		
/ /						****		
1 1								
1 1								
11								
DS-DE 13 (Rev. 11/13	) SI	EE REVERSE FOR I	NSTRUCTIONS A	ND CODE VALU	IES			

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (3) Cover Period 7 21, 18 through (4) Page (5) (7) (8) (9) (10) (11) Date **Full Name** Purpose (Last, Suffix, First, Middle) (6) (add office sought if Street Address & Sequence Expenditure contribution to a City, State, Zip Code Number candidate) Type Amendment Amount Vuter 3 1002 72.30 CON CARO