CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Lynn Gray	OFFICE USE ONLY							
` ,	Name	ONLINE SUBMISSION							
(2)	13611 Circa Crossing Dr.	Submitted on:							
	Address (number and street)	6/30/2023 19:51:23 (eastern)							
	Lithia, FL 33547	(casecin)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 2379							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: School Board	Member, Dist. 7							
	Political Committee (PC)	□ cl _ l l _ '' P0 _ F00 l _ '' l _ l _ l							
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ 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							
	individual making electioneering communications)	•							
	(5) Report	Identifiers							
Cove	er Period: From $6 / 1 / 2023$ To								
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , <u>910</u> . <u>00</u>	Monetary							
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
Tota	I Monetary \$, , 910 . 00	Office Account \$, , , 0 . 00							
Tota	, , , , , , , , , , , , , , , , , , ,	Total Monetary \$, , 0 . 00							
In-Ki	and \$, , 0.00	,,							
111-131	,,,	(8) Other Distributions							
		\$, , <u>0</u> 00							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,, <u>910</u> 00	\$, , <u>0</u> . <u>00</u>							
	(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:									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Lynn Gray			(2) I.D. Number _		2379		
•	6/1/202	3		6/30/	2023				
(3) Cover Period	1	1	through	1	7	(A) Page	1	of	1

(5) Date	(7) Full Name	(8)		(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	c	ontributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
6/23/2023	Evans, Don 13505 Tampa, FL 33624		retired	СН			\$250.00
1							
6/23/2023	Gray, Lewis Gray 13611 Circa Crossing Dr Lithia, FL 33547-4349	I	retired	СН			\$50.00
2							
6/23/2023	Liftman, Dan 470Executive Center Dr. W. Palm Beach, FL 33401	I		СН			\$10.00
3	Tahangan Amban	I		СН			\$100.00
6/30/2023	Johansen, Amber 97 Biscayne Ave. Tampa, FL 33401	1		Сн			\$100.00
4							
6/30/2023	Gray, Lewis Gray 13611 Circa Crossing Dr Lithia, FL 33625	I	retired	СН			\$500.00
J I							
1 I							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Lynn Gray (2) I.D. Number								
		0/2023) 1) Page <u>1</u>		0			
(5) Date (6) Sequence Number	(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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