

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Rose Conry  
 Name

(2) https://roseconry.com; 9771 Woodrose Lane  
 Address (number and street)

Jacksonville, FL 32257  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1185220]

Submitted on:  
 3/1/2019 15:51:53 (eastern)

Check here if address has changed

(3) ID Number: 787

(4) Check appropriate box(es):

- Candidate Office Sought: City Council District 6
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 2 / 16 / 2019 To 2 / 22 / 2019 Report Type: F5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 250 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 250 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 10 . 30

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 10 . 30

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 130 , 514 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      , 38 , 736 . 65

### (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) \_\_\_\_\_

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

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Rose Conry (2) I.D. Number 787

(3) Cover Period 2/16/2019 through 2/22/2019 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
2/17/2019 / /	DADDARIO, LEANN 1504 DRURY CT. ST. AUGUSTINE, FL 32092	I	building sales	CH			\$250.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Rose Conry

(2) I.D. Number 787

(3) Cover Period 2/16/2019 through 2/22/2019

(4) Page 1 of 1

(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
(6) Sequence Number					
2/17/2019 / /	ANEDOT, Other PO Box 84314 Baton Rouge, LA 70884	cc processing fee	MO		\$10.30
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