CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Rose Conry	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	https://roseconry.com; 9771 Woodrose I	Lane Submitted on:							
	Address (number and street)	4/10/2019 13:18:28 (eastern)							
	Jacksonville, FL 32257								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:							
(4) Check appropriate box(es):									
	 ☐ Candidate Office Sought: City Council District 6 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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 ☐ Check								
	(5) Report	Identifiers							
	er Period: From 3 / 15 / 2019 To								
<u>X</u> 0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
	I Monetary \$,,,00	Total Monetary \$,13 , 500 . 00							
In-Ki	nα Ψ , ,	(8) Other Distributions \$, , 0 00_							
(9)	(9) TOTAL Monetary Contributions To Date \$, 139, 014.00								
(T)	(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								
_X Si	gnature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Rose Conry				2) I.D. Numbe	r	87
	3/15/2019		6	/17/2019		_	
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	e <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ros	e Conry					(2)	I.D. Num	ber	7	187	
	3/15	/2019		6/17/20	19						
(3) Cover Perio	od /	1	through	1	1	(4)	Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
3/19/2019	RESEARCH, DATA TARGETING 6211 NW 132nd St Gainesville, FL 32653	consulting	МО		\$5,000.00
3/21/2019	GROUP, PASS COSULTING 3838 HARTWOOD LANE JACKSONVILLE, FL 32216	consulting fees	МО		\$8,000.00
4/10/2019	CONRY, ROSE 3728 PHILIPS HWY SUITE 216 Jacksonville, FL 32207	repayment of loan	DI		\$1,097.05
4/10/2019	ROBINSON GRUTERS & ROBERTS, 133 Harbor Dr S Venice, FL 34285	accounting service	МО		\$500.00
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