

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Phillips  
 Name  
 (2) 14130 Yellow Bluff Road  
 Address (number and street)  
Jacksonville, FL 32224  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1063337]

Submitted on:  
 5/11/2014 21:38:33 (eastern)

Check here if address has changed

(3) ID Number: 577

(4) Check appropriate box(es):

- Candidate Office Sought: City Council District 2
- 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 4 / 1 / 2014 To 4 / 30 / 2014 Report Type: M4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 850 . 12

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 850 . 12

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 20 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 20 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 4 , 347 . 76

### (10) TOTAL Monetary Expenditures To Date

\$        , 2 , 132 . 34

### (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 Robert Phillips (2) I.D. Number 577  
 4/1/2014 4/30/2014  
 (3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (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
(6) Sequence Number		Type	Occupation				
4/11/2014 / /	Powell, Fitz 219 N Newnan St Jacksonville, FL 32202	I	insurance	CH			\$250.00
1							
4/30/2014 / /	Assaf, Michael 15799 Shellcracker Rd Jacksonville, FL 32226	I	business owner	CH			\$250.00
2							
4/30/2014 / /	Assaf, Robert 15860 Sawpit Rd Jacksonville, FL 32226	I	business owner	CH			\$250.00
3							
4/30/2014 / /	Boyle, Scott 11258 Sofrenko Dr Jacksonville, FL 32218	I		CA			\$25.00
4							
4/30/2014 / /	Victoria, Boyle 11258 Sofrenko Dr Jacksonville, FL 32218	I		CA			\$25.00
5							
4/30/2014 / /	Boyle, Joshua 11258 Sofrenko Dr Jacksonville, FL 32218	I		CA			\$25.00
6							
4/30/2014 / /	Boyle, Meghan 11258 Sofrenko Dr Jacksonville, FL 32218	I		CA			\$25.00
7							
4/30/2014 / /	Vystar, 13075 N Main St Jacksonville, FL 32218	O		IN			\$0.12
8							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert Phillips

(2) I.D. Number 577

(3) Cover Period 4/1/2014 through 4/30/2014

(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					
4/1/2014 //	Commerce, Downtown Council, Jacksonville Regional Chamber of jgj@hbgcpa.com	breakfast	MO		\$20.00
1					
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