CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Terry Reed	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1086473]							
(2)	11630 Tanager Drive	Submitted on:							
	Address (number and street) Jacksonville, FL 32225	3/31/2015 09:52:54 (eastern)							
	City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 609							
(4)	Check appropriate box(es):	(-)							
	 ☐ Candidate Office Sought: City Council At Large Group 1 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	dentifiers							
Cove	, , .	6 / 22 / 2015 Report Type: TRF							
<u>X</u> 0	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , 000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , , 000	Total Monetary \$. 0 . 00							
In-Ki	and \$,,0.00	Total Monetary \$, , , 0 . 00							
		(8) Other Distributions \$, , 000							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(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 Deputy Treasurer								
X		<u>X</u>							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Terry Reed			(2) I.D. Number				
	3/20/2015	6	/22/2015					
(3) Cover Pe	riod / /	thro	ough	<i>l l</i>	(4) Page	1	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind	Assertance		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Terry	Reed					 (2) I.D. Nur	nber	6	509	
		3/20/2	2015		6/22/20	015		-			
(3) Cover Pe	eriod	1	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
3/31/2015	Reed, Terry Protected Jacksonville, Fl 32218	reimburse loan	DI		\$55.01
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