

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lori Boyer
 Name
 (2) 2234 River Road
 Address (number and street)
Jacksonville, FL 32207
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1082802]

Submitted on:
 12/9/2014 15:39:23 (eastern)

Check here if address has changed (3) ID Number: 616

(4) Check appropriate box(es):

Candidate Office Sought: City Council District 5

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 10 / 1 / 2014 To 10 / 31 / 2014 Report Type: M10

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 400 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , -400 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , -400 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 86 , 795 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 2 , 785 . 39

(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 Lori Boyer (2) I.D. Number 616

10/1/2014 through 10/31/2014

(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
10/27/2014 / /	Myrick, Ginny 245 Riverside Avenue Suite 150 Jacksonville, FL 32202	I	consultant	IK	food & beverage	Add	\$400.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lori Boyer

(2) I.D. Number 616

(3) Cover Period 10/1/2014 through 10/31/2014

(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					
10/27/2014 //	Myrick, Ginny 245 Riverside Avenue Suite 150 Jacksonville, FL 32202	food & beverage	MO	Delete	\$400.00
1					
//					
//					
//					
//					
//					