

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Rob Schoonover  
 Name  
 (2) 4446 Hendricks Avenue, Suite 219  
 Address (number and street)  
Jacksonville, FL 32207  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1086246]

Submitted on:  
 3/20/2015 15:22:35 (eastern)

Check here if address has changed

(3) ID Number: 618

(4) Check appropriate box(es):

Candidate Office Sought: Sheriff

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 3 / 7 / 2015 To 3 / 19 / 2015 Report Type: F7

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 100 . 00

Loans \$      , 20 , 000 . 00

Total Monetary \$      , 20 , 100 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      , 12 , 612 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      , 12 , 612 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 181 , 505 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      , 170 , 954 . 43

### (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 Rob Schoonover (2) I.D. Number 618  
 3/7/2015 through 3/19/2015  
 (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				
3/12/2015 / /	Schoonover, Rob 4446 Hendricks Ave Suit 219 Jacksonville, FL 32207	S	retired police	LO			\$5,000.00
1							
3/16/2015 / /	Schoonover, Rob 4446 Hendricks Avenue Jacksonville, FL 32207	S	retired police	LO			\$8,000.00
2							
3/16/2015 / /	Sweeney, Dale C 13138 Cricket Cove Rd N Jacksonville, FL 32224	I		CH			\$100.00
3							
3/19/2015 / /	Schoonover, Rob 4446 Hendricks Ave Suit 219 Jacksonville, FL 32207	S	retired police	LO			\$7,000.00
4							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Rob Schoonover

(2) I.D. Number 618

(3) Cover Period 3/7/2015 through 3/19/2015

(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
3/12/2015 //	Reliant Florida Consulting LLC, PO Box 1776 Keystone Heights, FL 32656	mailing & poll	MO		\$4,500.00
1					
3/17/2015 //	Reliant Florida Consulting LLC, PO Box 1776 Keystone Heights, FL 32656	mailings	MO		\$8,000.00
2					
3/19/2015 //	Tax Collector, 231 E. Forsyth St. Jacksonville, FL 32202	sign citations	MO		\$112.00
3					
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