CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Melody Shacter	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	426 Orange Bluff Avenue	[1088531]								
	Address (number and street)	Submitted on: 6/22/2015 12:02:29 (eastern)								
	Jacksonville, FL 32211									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:632								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: City Council District 1</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From 3 / 20 / 2015 To	6 / 22 / 2015 Report Type: <u>TRF</u>								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ , , ,000	Monetary								
Loar	<del></del>	Transfers to Office Account \$ , , 0 . 00								
Tota	I Monetary \$ , , 0 . <u>00</u>	Total Monetary \$ ,4 , <u>741</u> . <u>78</u>								
In-Ki	nd \$ , , 0 . <u>00</u>									
		(8) Other Distributions \$ , , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>49</u> , <u>559</u> . <u>15</u>	\$, <u>49</u> , <u>559</u> . <u>15</u>								
_(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)  (Type name)									
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
Si	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Melody Shacter				2) I.D. Numbe	er <u>6</u>	32
	3/20/2015 od/////		6	/22/2015 ///	(4) Pag	e	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9) Contribution	(10)	(11)	(12)
Number / /	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
J I							
j I							
1 1							
1 1							
J I							

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name _1	Melody	Shacte	er				 (2) I.D. Nur	nber	6	32	
		3/20/2	015		6/22/20	015		-			
(3) Cover P	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
3/27/2015	Daigle Creative, 9957 Moorings Drive 406 Jacksonville, FL 32257	campaign mgmt	MO		\$3,884.37
3/27/2015	Shacter, Melody 426 Orange Bluff Avenue Jacksonville, FL 32211	election night party	MO		\$637.68
5/18/2015	Daigle Creative, 9957 Moorings Drive #406	refund overpayment of invoice	RE		\$-418.20
3 5/18/2015	Jacksonville, FL 32257  Suntrust, 1300 Riverplace Blvd #100	banking fee	МО		\$12.00
5/18/2015	Jacksonville, FL 32207  Shacter, Melody 426 Orange Bluff Avenue	printing, water, shirts	RM		\$625.93
5	Jacksonville, FL 32211				
6/1/2015	shacter, Melody 426 Orange Bluff Ave Jacksonville, FL 32211	reimbursement of loan	DI		\$5,794.46
//					
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