

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sam Newby
Name

(2) 1504 Doncaster Avenue
Address (number and street)
Jacksonville, FL 32208
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1083923]

Submitted on:
1/21/2015 11:39:47 (eastern)

Check here if address has changed

(3) ID Number: 663

(4) Check appropriate box(es):

- Candidate Office Sought: City Council At Large Group 5
- 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 1 / 1 / 2015 To 1 / 16 / 2015 Report Type: F1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 5 , 700 . 00

Loans \$, , 0 . 00

Total Monetary \$, 5 , 700 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 8 , 741 . 45

(10) TOTAL Monetary Expenditures To Date

\$, , 0 . 00

(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 Sam Newby (2) I.D. Number 663

(3) Cover Period 1/1/2015 through 1/16/2015 (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
1/15/2015 / /	BARTLEY, SHELIA ***Protected***	I mental health	CH			\$200.00
1						
1/12/2015 / /	BARROW, DONNA 5555 BAREFOOT RD JACKSONVILLE, FL 32206	I secretary	CH			\$500.00
2						
1/12/2015 / /	NEWBY, SAMUEL 1504 DONCASTER AVE JACKSONVILLE, FL 32208	S supervisor	CH			\$5,000.00
3						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sam Newby

(2) I.D. Number 663

(3) Cover Period 1/1/2015 through 1/16/2015

(4) Page 1 of 0

(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					
/ /					
/ /					
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