

## 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**  
 [1081389]

Submitted on:  
 11/6/2014 20:18:21 (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 10 / 1 / 2014 To 10 / 31 / 2014 Report Type: M10

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 550 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 550 . 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

\$      ,      , 2 , 391 . 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 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) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10/30/2014 / /	Davis, John 12000 International Dr Orlando, FL 32819	I	manager	CH			\$150.00
1							
10/30/2014 / /	Chatfield, Tracy 5532 Silverdale End Jacksonville, FL 32209	I	manager	CH			\$200.00
2							
10/30/2014 / /	Moore-Fletcher, Chiquita 5260 Collins Rd Unit 1103 Jacksonville, FL 32244	I	superinten dent	CH			\$200.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sam Newby

(2) I.D. Number 663

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

(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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