

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Mincy Pollock
 Name

(2) 12518 Woodfield Circle West
 Address (number and street)
Jacksonville, FL 32258
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1081718]

Submitted on:
 11/10/2014 23:53:08 (eastern)

Check here if address has changed (3) ID Number: 670

(4) Check appropriate box(es):

Candidate Office Sought: City Council At Large Group 3

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 8 / 1 / 2014 To 8 / 31 / 2014 Report Type: M8

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, -1 , 000 . 00

Loans \$, , 0 . 00

Total Monetary \$, -1 , 000 . 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
 \$, 5 , 515 . 33

(10) TOTAL Monetary Expenditures To Date
 \$, 5 , 178 . 66

(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 Mincy Pollock (2) I.D. Number 670

8/1/2014 through 8/31/2014

(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		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
8/14/2014 / /	First Coast Multi-Lines, 521 N Liberty Street Jacksonville, FL 32202	B	insurance company	CA		Delete	\$1,000.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Mincy Pollock

(2) I.D. Number 670

(3) Cover Period 8/1/2014 through 8/31/2014

(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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