CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Karen Nuland	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1146424]							
(2)	4427 Herschel Street	Submitted on:							
	Address (number and street)  Jacksonville, FL 32210	11/17/2017 08:07:11 (eastern)							
	City, State, Zip Code	<del></del>							
	☐ Check here if address has changed	(3) ID Number: 784							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: School Board Dist 6</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							
Cover Period: From 10 / 1 / 2017 To 10 / 31 / 2017 Report Type: M10									
	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , ,000	Monetary							
Loans \$, <u>10</u> , <u>000</u> . <u>00</u>		Transfers to Office Account \$ , , , 0 . 00							
Total Monetary \$ ,10 , _00000		Total Monetary \$ , , 0 . 00							
In-Ki	ind \$,,,000	,,,							
		(8) Other Distributions \$ , , 000_							
(9)	TOTAL Monetary Contributions To Date \$ ,10 , _00000	(10) TOTAL Monetary Expenditures To Date \$ , 1 , _00000							
(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    Deputy Treasurer									
X		<u>X</u>							
Si	gnature	Signature							

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

(1) Name	Karen Nuland	(2) I.D. Number						
	10/1/2017		1	0/31/2017		1	1	
(3) Cover Perio	od/	thro	ough	<i>l l</i>	(4) Pag	le	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	Amount	
10/16/2017	Nuland, Karen 4427 Herschel Street Jacksonville, Fl 32210		special events	LO	the money was loaned to the campaign by the candidate	Add	\$10,000.0	
J I								
1 1								
J I								
I I								
f I								
1 1								
1 1								
DS-DE 13 (Rev. 11/1	3 )	SEE RE	VERSE FOR I	NSTRUCTIONS	S AND CODE VAL	.UES		

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Karen Nuland (2) I.D. Number									
	10/1/2017 	10/31/2017	4) Page <u>1</u>		0				
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)				
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount				
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