

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Boylan  
 Name  
 (2) 1829 Melrose Plantation Dr.  
 Address (number and street)  
Jacksonville, FL 32223  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1175200]

Submitted on:  
 10/9/2018 10:27:57 (eastern)

Check here if address has changed (3) ID Number: 796

(4) Check appropriate box(es):

Candidate Office Sought: City Council District 6

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 9 / 1 / 2018 To 9 / 30 / 2018 Report Type: M9

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 350 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 350 . 00

In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        , 1 , 379 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        , 1 , 379 . 00

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 63 , 775 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 23 , 980 . 85

### (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 Michael Boylan (2) I.D. Number 796

(3) Cover Period 9/1/2018 through 9/30/2018 (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		Type	Occupation	Type	Description	Amendment	Amount
9/4/2018 / /	Chepenik, Lois 2647 Forest Point Court Jacksonville, FL 32257	I	retired	CH			\$100.00
1							
9/11/2018 / /	Morse, Helen 5 Northgate Drive Ponte Vedra Beach, FL 32082	I	retired	CH			\$100.00
2							
9/27/2018 / /	Coxe III, Henry 101 East Adams St. Jacksonville, FL 32202	I	attorney	CH			\$150.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Michael Boylan

(2) I.D. Number 796

(3) Cover Period 9/1/2018 through 9/30/2018

(4) Page 1 of 1

(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					
9/4/2018 //	Piryx, 2nd Floor 995 Market St. San Francisco, CA 90143	credit card processing	MO		\$4.50
1					
9/11/2018 //	Piryx, 2nd Floor 995 Market St. San Francisco, CA 90143	credit card processing	MO		\$4.50
2					
9/4/2018 //	Reliant Florida, 50 North Laura Street Jacksonville, FL 32202	consulting	MO		\$1,000.00
3					
9/4/2018 //	Reliant Florida, 50 North Laura Street Jacksonville, FL 32202	software license	MO		\$370.00
4					
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//					
//					
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