CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Victoria Blackman	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1187002]							
(2) 1817 Biscayne Bay Circle	Submitted on:							
Address (number and street) Jacksonville, FL 32218	4/11/2019 09:19:11 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 798							
(4) Check appropriate box(es):								
<ul> <li>Candidate Office Sought: <u>City Council District 7</u></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 <u>1</u> / <u>1</u> / <u>2019</u> To	4/ <u>11</u> / <u>2019</u> Report Type: <u>RQ</u>							
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , , 0 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,0							
Total Monetary       \$	Total Monetary \$ , , , 0 . 00							
······································	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>585</u> · <u>00</u>	\$,, <u>585</u> . <u>00</u>							
(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)	(Type name)							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
X	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name <u>Victoria Blackman</u>				(2) I.D. Number				
	1/1/2019			4/11/2019					
(3) Cover Peri	od / /	thro	bugh	11	(4) Pag	e	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1 1	-								
1	_								
1 1	-								
1 1	-								
1 1	_								
1 1									
		3				-			
1 1	-								
1 1	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name <u>Vict</u>	CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES oria Blackman (2) I.D. Number 7							
	1/1/2019 4/ I/ through	/11/2019	4) Page <u>1</u>		1			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)			
Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount			
	Blackman, Victoria 1817 Biscayne Bay Cir Jacksonville, Fl 32218	repayment of loan	DI		\$85.00			
_/ /								
_/ /								
_/ /								
_/_/								
_ / /								
11								
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