CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Tameka Gaines Holly	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	http://www.votetameka.com; 731 Duval S	Station Rd. Suite 107, Room 315							
	Address (number and street)	Submitted on:							
	Jacksonville, FL 32218	8/8/2019 10:16:19 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:805							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: City Council District 8</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	(5) Report	Identifiers							
Cove	er Period: From <u>12</u> / <u>1</u> / <u>2018</u> To								
	original Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	h & Checks \$ , , 0 . <u>00</u>	Monetary							
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , , 0 . 00	Total Monetary \$ , 0 . 00							
In-Ki	ind \$,,	Total Monetary \$ , , , 0 . 00							
		(8) Other Distributions \$ , , 000							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T)	(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								
X	gnature	X Signature							
<b>ગ</b>	unature	ı əlunalure							

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

(1) Name	Tameka Gaines Holly				2) I.D. Numbe	r8	0.5
	12/1/2018		1	2/31/2018			
(3) Cover Perio	od / /	thro	ough	11	(4) Page	e <u>1</u>	of
				T			
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_	SECOND DESCRIPTION OF STREET		Incomplete and a second		
Sequence Number	Street Address &		ontributor	Contribution	In-kind	Amendment	Amount
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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1 1							

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Γameka	Gaines	Holly	-			 (2) I.D. Nun	nber	8	305	
		12/1/2	018		12/31/	2018					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/20/2018	USPS, 150 Busch Dr. Jacksonville, FL 32218	postage	MO	Delete	\$500.00
12/20/2018	USPS, 150 Busch Dr. Jacksonville, FL 32218	postage	MO	Add	\$485.00
12/20/2018	USPS, 150 Busch Dr. Jacksonville, FL 32218	postage	МО	Add	\$15.00
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