

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Omega Allen  
 Name  
 (2) 13825 Victoria Lakes Dr  
 Address (number and street)  
Jacksonville, FL 32226  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1184077]

Submitted on:  
 2/5/2019 16:47:43 (eastern)

Check here if address has changed

(3) ID Number: 932

(4) Check appropriate box(es):

Candidate Office Sought: Mayor

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 1 / 12 / 2019 To 1 / 25 / 2019 Report Type: F2

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , -600.00

Loans \$        ,        , 0.00

Total Monetary \$        ,        , -600.00

In-Kind \$        ,        , 0.00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , -600.00

Transfers to Office Account \$        ,        , 0.00

Total Monetary \$        ,        , -600.00

### (8) Other Distributions

\$        ,        , 0.00

### (9) TOTAL Monetary Contributions To Date

\$        , 9 , 870.00

### (10) TOTAL Monetary Expenditures To Date

\$        , 7 , 785.12

### (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 Omega Allen (2) I.D. Number 932

(3) Cover Period 1/12/2019 through 1/25/2019 (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
1/25/2019 / /	Allen, Eldre Omega 13825 Victoria Lakes Dr. Jacksonville, FL 32226	I	general contractor	RE		Add	\$-600.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Omega Allen

(2) I.D. Number 932

(3) Cover Period 1/12/2019 through 1/25/2019

(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					
1/25/2019 / /	Allen, Eldre Omega 13825 Victoria Lakes Dr. Jacksonville, FL 32226	repay candidate loan	RM	Delete	\$600.00
1					
1/25/2019 / /	Allen, Eldre Omega 13825 VICTORIA LAKES DR Jacksonville, FL 32226	refund	RM	Add	\$0.00
2					
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