CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) _ Frie	nds of Proven Leadership	OFFICE USE ONLY				
Name		ONLINE SUBMISSION [1187222]				
(-)	Monarch Landing Dr.	Submitted on:				
	ss (number and street) onville, FL 32257	4/22/2019 16:12:09 (eastern)				
	State, Zip Code	<del></del>				
	eck here if address has changed	(3) ID Number: 955				
	appropriate box(es):					
☐ Can						
X Polit	tical Committee (PC)					
	0 ( )	Check here if PC or ECO has disbanded				
		<ul><li>☐ Check here if PTY has disbanded</li><li>☐ Check here if no other IE or EC reports will be filed</li></ul>				
	ual making electioneering communications)					
	(5) Panari	(1.1				
Cayor Perio		t Identifiers  A / 1.2 / 2.0.1.0 Report Type: C.2				
		4 / 12 / 2019 Report Type: <u>G3</u>				
Original		ecial Election Report				
(6) Contri	butions This Report	(7) Expenditures This Report				
	205 00	Monetary				
Cash & Che	cks \$,, 295.00	Expenditures \$ , , 0 . 00				
Loans	\$ , , 0.00	Transfers to				
LUario	·	Office Account \$ , , 0 . 00				
Total Moneta	ary \$ , , 295 . 00					
	·	Total Monetary \$ , , 0 . 00				
In-Kind	\$ , , <u>0</u> . <u>00</u>					
		(8) Other Distributions				
		\$,,, <u>0</u> . <u>00</u>				
(9) TOTAL	_ Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
` `		\$ , , 0. 00				
		, , , , ,				
		tification				
	-	son 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 or electioneer		☐ Candidate ☐ Chairperson (only for PC and PTY)				
X		X				
Signature		Signature				

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Friends of Proven		2) I.D. Numbe	955			
	4/6/2019			/12/2019			
(3) Cover Peri	od / /	thro	ough	11_	(4) Pag	je <u>1</u>	of
	1	T			I	1	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)		AND THE POST AND THE RESIDENCE		Income Instrumental		
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	
Number	City, State, Zip Code Pittman, JuCoby		Occupation candidate	Type CH	Description	Amendment	Amount \$295.0
4/8/2019	2816 Ribault Scenic Dr	5	Candidate	CH			\$293.0
1, 3, 2015	Jacksonville, FL 32208						
1							
1 1							
1 1							
1 1							
3F 1							
2 2							
/ /							
J I							
1 1							
A							
/ /	-						

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

, wante	nds of Proven Leadership 4/6/2019 4/	<u> </u>	2) I.D. Numbe	2	955
) Cover Period _	/through		4) Page <u>1</u>	of	0
(5) Date (6) Sequence Number	(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)	(11) Amount
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OS-DE 14 (Rev. 11/13 )	CEE DEVEDEE FOR INC	TRUCTIONS AND CODE	NALUE6	