

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Abene
 Name
 (2) 1520 River Oaks Road
 Address (number and street)
Jacksonville, FL 32207
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1196113]
 Submitted on:
 12/10/2019 10:19:44 (eastern)

Check here if address has changed (3) ID Number: 962

(4) Check appropriate box(es):
 Candidate Office Sought: School Board Dist 3
 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 11 / 1 / 2019 To 11 / 30 / 2019 Report Type: M11
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 285 . 00
 Loans \$, , 0 . 00
 Total Monetary \$, , 285 . 00
 In-Kind \$, , 105 . 12

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 0 . 00

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

(9) TOTAL Monetary Contributions To Date
 \$, , 810 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 0 . 00

(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 Robert Abene (2) I.D. Number 962
 11/1/2019 through 11/30/2019
 (3) Cover Period / / through / / (4) Page 1 of 2

(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
11/13/2019 / /	Abene, Robert Michael 1520 River Oaks Rd. Jacksonville, FL 32207	S	educator	IK	light refreshmen ts and food served at volunteer		\$30.94
1							
11/16/2019 / /	Abene, Robert Michael 1520 River Oaks Rd. Jacksonville, FL 32207	S	educator	IK	volunteer meeting to discuss donor outreach.		\$12.74
2							
11/17/2019 / /	Abene, Robert Michael 1520 River Oaks Rd. Jacksonville, FL 32207	S	educator	IK	printed 100 additional petitions and 100 additional		\$10.00
3							
11/17/2019 / /	Abene, Robert Michael 1520 River Oaks Rd. Jacksonville, FL 32207	S	educator	IK	snacks and refreshmen ts served at monthly volunteer meeting to		\$26.94
4							
11/17/2019 / /	Pittman, Stacey M. 4122 Hidden Branch Dr. Jacksonville, FL 32257	I		CH			\$35.00
5							
11/18/2019 / /	Joyner, Pam 3924 Cordova Ave Jacksonville, FL 32207	I	retired	CH			\$100.00
6							
11/21/2019 / /	Decunto, Mario E. 10351 Sylvan Ln. W. Jacksonville, FL 32257	I		CH			\$50.00
7							
11/21/2019 / /	Miner, Phillip W. 1306 Alderman Rd. Jacksonville, FL 32211	I	retired	CH			\$50.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert Abene (2) I.D. Number 962
 11/1/2019 through 11/30/2019
 (3) Cover Period / / through / / (4) Page 2 of 2

(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
11/25/2019 / /	Wright, Lisa G. 1714 Felch Ave. Jacksonville, FL 32207	I	educator	CH			\$50.00
9							
11/29/2019 / /	Abene, Robert Michael 1520 River Oaks Rd. Jacksonville, FL 32207	S	educator	IK	special candidate bank fee.		\$17.00
10							
11/29/2019 / /	Abene, Robert Michael 1520 River Oaks Rd. Jacksonville, FL 32207	S	educator	IK	donation to self of 750 pages of needed copy paper		\$7.50
11							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert Abene

(2) I.D. Number 962

(3) Cover Period 11/1/2019 through 11/30/2019

(4) Page 1 of 0

(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					
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