

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Boylan

Name

(2) 1829 Melrose Plantation Drive

Address (number and street)

Jacksonville, FL 32223

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 1101

OFFICE USE ONLY

ONLINE SUBMISSION

[1274739]

Submitted on:

8/8/2022 13:29:45 (eastern)

(4) Check appropriate box(es):

☒ Candidate Office Sought: City Council District 6

☐ 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 7 / 1 / 2022 To 7 / 31 / 2022 Report Type: M7

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 000 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1 , 000 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 2 , 514 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 2 , 514 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 45 , 400 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 20 , 573 . 80

(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 Michael Boylan (2) I.D. Number 1101
 7/1/2022 through 7/31/2022
 (3) Cover Period 7/1/2022 / 7/31/2022 (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
7/21/2022 / /	HCA North Florida Division, 3625 University Blvd Jacksonville, FL 32216	B	hospital	CH			\$1,000.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Boylan (2) I.D. Number 1101
 (3) Cover Period 7/1/2022 through 7/31/2022 (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
7/26/2022 / /	Supervisor of Elections Office, 105 East Monroe St. Jacksonville, FL 32202	petition processing	MO		\$7.50
1					
7/31/2022 / /	Bank, First Citizens PO Box 27131 Raleigh, NC 27611	bank fees	MO		\$6.50
2					
7/31/2022 / /	Florida, Reliant 50 North Laura Street Suite 2500 Jacksonville, FL 32202	consulting services	MO		\$2,500.00
3					
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