CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Keep It Real Jax Name (2) 634 Dyal Street Address (number and street)	OFFICE USE ONLY ONLINE SUBMISSION [1252208] Submitted on:							
Jacksonville, FL 32206 City, State, Zip Code ☐ Check here if address has changed (4) Check appropriate box(es):	(3) ID Number: 1033							
Candidate Office Sought: ∑ 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								
Cover Period: From <u>11</u> / <u>1</u> / <u>2021</u> To	t Identifiers 11 / 30 / 2021 Report Type: M11 ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$, , 9 . 62	Monetary							
Loans \$,,	Transfers to Office Account \$, , , 0 . 00							
In-Kind \$,,	Total Monetary \$, , , 0 . 00							
	(8) Other Distributions \$, , 000							
(9) TOTAL Monetary Contributions To Date \$,117_,04923_								
	tification son to falsify a public record (ss. 839.13, F.S.) rect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)							
X Signature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Keep It Real Jax	(2) I.D. Number							
(2) Cours Bosis	11/1/2021	thro		1/30/2021	(4) Down	· 1	of ¹		
(3) Cover Perio	od / /		ougri	<i>i i</i>	(4) Page	2	or _		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6)	(Last, Suffix, First, Middle)								
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
11/30/2021	VyStar Credit	В	Occupation	IN	Description		\$9.6		
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1	Uacksonville, F1 32232								
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DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VALU	JES			

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name	0.00	It Real						(2) I.D. Nur	nber		1033
(3) Cover Pe	eriod	11/1/2	021	through	11/30/	2021		(4) Page	1	of	0
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(5) Date	(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
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