Received 7/10/14
4:05pm

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Name: Jeff Holness Campaign

(2) Address (number and street): 920 SW 74 Terrace

City, State, Zip Code: Plantation FL 33317

☐ **Check here if address has changed**

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

☑ Candidate Office Sought: Plantation City Council, Group 2

☐ 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 06 / 01 / 14 To 06 / 30 / 14 Report Type: M6

☐ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$ 0.00
Loans	$
Total Monetary	$
In-Kind	$

(7) Expenditures This Report

Monetary Expenditures	$ 0.00
Transfers to Office Account	$
Total Monetary	$

(8) Other Distributions $ 0.00

(9) TOTAL Monetary Contributions To Date $ 3290.30

(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) Jeff Holness

☐ Individual (only for IE or electioneering comm.) ☑ Treasurer ☐ Deputy Treasurer

X [signature] Holness

Signature

(Type name) Jeff Holness

☑ Candidate ☐ Chairperson (only for PC and PTY)

X [signature]

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jeff Holness Campaign (2) I.D. Number _____

(3) Cover Period 06/01/14 through 06/30/14 (4) Page 1 of 1

(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) Amendment	(11) Amount
/ /					
/ /					
/ /	NO				
/ /	Expenditures				
/ /					
/ /					
/ /					
/ /					

DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Jeff Holness Campaign **(2) I.D. Number** _____

(3) Cover Period 06 / 01 / 14 through 06 / 30 / 14 **(4) Page** 1 of 1

(5) Date / (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /							
/ /							
/ /	No						
/ /	Contributions						
/ /							
/ /							
/ /							

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES