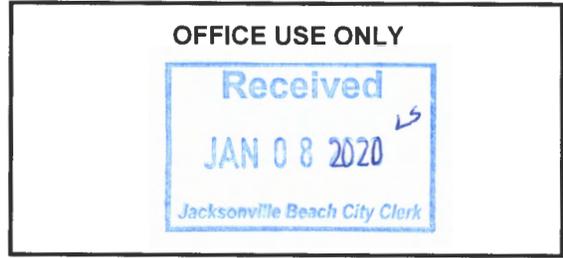


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Frances C. Povloski
Name

(2) 402 15th Street North
Address (number and street)
Jacksonville Beach, FL 32250
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City Council Seat 1 At-Large
- 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 / 01 / 2019 To 11 / 30 / 2019 Report Type: 2019M11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 10 . 00

Total Monetary \$ _____ , _____ , 10 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 64 . 14

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 64 . 14

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 1 , 010 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 440 . 01

(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) Dennis Povloski

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

X _____
Signature

(Type name) Frances Povloski

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Frances C. Povloski (2) I.D. Number _____

(3) Cover Period 11 / 01 / 19 through 11 / 30 / 19 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
11 / 05 / 2019	Frances C. Povloski 402 15th Street N. Jacksonville Beach, FL 32250	S	Financial Advisor	Loan			\$10.00
2019-11-C0001							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Frances C. Povloski

(2) I.D. Number _____

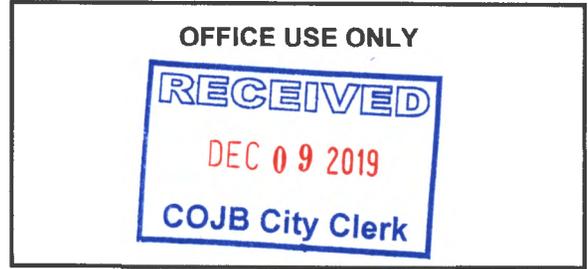
(3) 11 / 01 / 19 through 11 / 30 / 19

(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
(6) Sequence Number					
11/05/19 2019-11-E0001	www.paypal.com Corporate Headquarters 2211 North First Street San Jose, CA 95131	Website for collecting campaign contribution	CAN		\$0.59
11 / 07 / 19 2019-11-E0002	Office Depot 1954 3rd Street South Jacksonville Beach, FL 32250	Printing Handouts for Meeting Event	CAN		\$32.53
11 / 12 / 19 2019-11-E0003	Staples 4106 3rd Street South Jacksonville Beach, FL 32250	Printing Handouts for Meeting Event	CAN	X	\$31.02

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Frances C. Povloski
 Name
402 15th Street North
 Address (number and street)
Jacksonville Beach, FL 32250
 Jacksonville Beach, FL 32250
 City, State, Zip Code



Check here if address has changed

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Cover Period: From 11 / 01 / 2019 To 11 / 30 / 2019 Report Type: 2019M11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

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Total Monetary \$ _____ , _____ , 10 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 64 . 14

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 64 . 14

(8) Other Distributions

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(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 010 . 00 ✓

(10) TOTAL Monetary Expenditures To Date

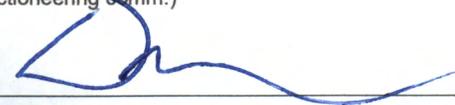
\$ _____ , _____ , 440 . 01 ✓

(11) Certification

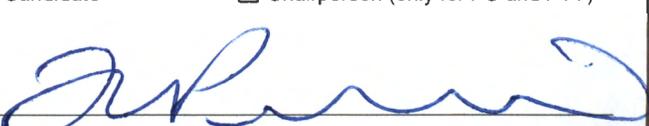
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I certify that I have examined this report and it is true, correct, and complete:

(Type name) Dennis Povloski
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
 Signature

(Type name) Frances Povloski
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Frances C. Povloski

(2) I.D. Number _____

(3) Cover Period 11 / 01 / 19 through 11 / 30 / 19

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)		(9)	(10)	(11)	(12)
(6) Sequence Number		Contributor Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
11 / 05 / 2019	Frances C. Povloski 402 15th Street N. Jacksonville Beach, FL 32250	S	Financial Advisor	Loan			\$10.00
2019-11-C0001					/ /		
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Frances C. Povloski

(2) I.D. Number _____

(3) 11 / 01 / 19 through 11 / 30 / 19

(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
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