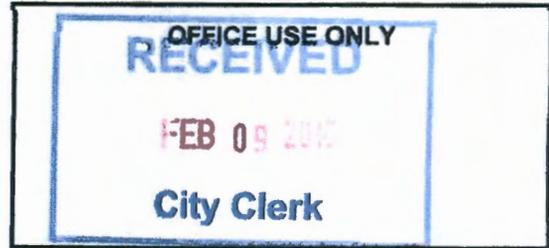


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christine Hoffman
 Name
 (2) 1026 13th St. N.
 Address (number and street)
Jacksonville Beach, FL 32250
 City, State, Zip Code



Check here if address has changed

(3) ID Number: N/A

(4) Check appropriate box(es):

- Candidate Office Sought: City of Jacksonville Beach - At Large Seat 1
- 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 01 / 01 / 16 To 1 / 31 / 16 Report Type: 2016-M1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . 17

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . 17

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , _____ 2100.81

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , _____ 3.49

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

X
 Signature

(Type name) Christine Hoffman
 Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Christine Hoffman

(2) I.D. Number N/A

(3) Cover Period 01 / 01 / 2016 through 01 / 31 / 2016

(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					
/ /					

RECEIVED
FEB 05 2016
City Clerk