CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Bruce A. Thomason
Name

(2) PO Box 50556
Address (number and street)
Jacksonville Beach, FL 32240-0556
City, State, Zip Code

☐ **Check here if address has changed**

OFFICE USE ONLY
RECEIVED
DEC 04 2013
City Clerk

(3) ID Number: _____

(4) Check appropriate box(es):

☑ Candidate Office Sought: Jacksonville Beach City Council, District 1, Seat 4
☐ 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 11 / 01 / 13 To 11 / 30 / 13 Report Type: M11

☐ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$ ___ , ___ , ___ . 00
Loans	$ ___ , ___ , ___ . 00
Total Monetary	$ ___ , ___ , ___ . 00
In-Kind	$ ___ , ___ , ___ . 00

(7) Expenditures This Report

Monetary Expenditures	$ ___ , ___ , 12 . 00
Transfers to Office Account	$ ___ , ___ , ___ . 00
Total Monetary	$ ___ , ___ , 12 . 00

(8) Other Distributions
$ ___ , ___ , ___ . 00

(9) TOTAL Monetary Contributions To Date
$ ___ , 2 , 800 . 00

(10) TOTAL Monetary Expenditures To Date
$ ___ , ___ , 299 . 64

(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) William G. Hillegass
☐ Individual (only for IE or electioneering comm.) ☑ Treasurer ☐ Deputy Treasurer
X William G. Hillegass
Signature

(Type name) Bruce A. Thomason
☑ Candidate ☐ Chairperson (only for PC and PTY)
X Bruce A. Thomason
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Bruce A. Thomason **(2) I.D. Number** _____

(3) Cover Period 11 / 01 / 13 through 11 / 30 / 13 **(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
/ /							0
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bruce A. Thomason (2) I.D. Number

(3) Cover Period 11 / 01 / 2013 through 11 / 30 / 2013 (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
11 / 21 / 13	Wells Fargo Bank 233 North 3rd Street Jacksonville Beach, FL 32250	Bank charge	Mon		12.00
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

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