

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



(3) ID Number: N/A

(4) Check appropriate box(es):

Candidate Office Sought: City Council Seat # 4 , District # 1

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 04 / 01 / 2014 To 04 / 30 / 2014 Report Type: 2014-M4

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 3 , 950 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 615 . 35

(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 N/A

(3) Cover Period 04 / 01 / 2014 through 04 / 01 / 2014 (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 Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT -- ITEMIZED EXPENDITURES

(1) Name Bruce A. Thomason

(2) I.D. Number ^{N/A} _____

(3) Cover Period 04 / 01 / 2014 through 04 / 01 / 2014

(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					
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