

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) J.R. REED  
Name

(2) 1121 N. 20th AVE  
Address (number and street)

HOLLYWOOD, FLA 33026  
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate (office sought): MAYOR
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 10/1/07 To 12/7/07 Report Type G-1

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ ~~800.00~~ <sup>JWR</sup>

Loans \$ 800.00

Total Monetary \$ 800.00 <sup>JWR</sup>

In-Kind \$ 0

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 1,539.69 <sup>JWR</sup>

~~1,520.00~~

Transfers to Office Account \$ 0

Total Monetary \$ 1,539.69 <sup>JWR</sup>

**(8) Other Distributions**

\$ 1,520.00

**(9) TOTAL Monetary Contributions To Date**

\$ ~~1,636.95~~ <sup>JWR</sup>  
1,750.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 6633.05

**(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) J.R. REED

Individual (only for electioneering commin)  Treasurer  Deputy Treasurer

**X** J.R. Reed  
Signature

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

(Type name) J.R. REED

Candidate  Chairperson (only for PC, PTY & electioneering commin, organization)

**X** J.R. Reed  
Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name J. R. REED (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 10/1/07 through 12/7/07 (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
11/14/07	<del>J. R. REED</del> CITY OF HOLLYWOOD 2600 HOLLYWOOD BLVD.	FILING FEE	MON		6520.00
11/16/07	CITY OF HOLLYWOOD 2600 HOLLYWOOD BLVD HOLLYWOOD, FLA	COPIES	MON		19.69
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

**CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name J.R. REED (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10/1/07 through 12/7/07 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
11/13/07 1	J.R. REED 1121 N. 20th AVE HOLLYWOOD, FLA	<del>I</del> I	RETIRED	JWA CAS LOA			\$500
11/13/07 2	J.R. REED 1121 N. 20th AVE, HOLLYWOOD, FLA	<del>I</del> I	RETIRED	LOA CAS JWR			\$100.00
11/15/07 3	J.R. REED 1121 N. 20th AVE HOLLYWOOD, FLA 3302	I	RETIRED	LOA			100.00
11/16/07 4	J.R. REED 1121 N. 20th AVE HOLLYWOOD, FLA. 33020	I	RETIRED	LOA			100.00
11							
11							
11							
11							