

**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. 33020
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 4/1/07 To 6/30/07 Report Type Q-2
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks ^{J.W.R.} \$ 700.00
 Loans \$ 100.00
 Total Monetary \$ 100.00
 In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0
 Transfers to Office Account \$ _____
 Total Monetary \$ 0

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 550.00

(10) TOTAL Monetary Expenditures To Date

\$ 68.92

(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 communication) Treasurer Deputy Treasurer

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 communication organization)

J. R. Reed
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name J. R. KEENE (2) I.D. Number _____
 (3) Cover Period 4/1/07 through 6/30/07 (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
(6) Sequence Number					
//	NO NE				
//					
//					
//					
//					
//					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 4/1/07 through 6/30/07 (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		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
6/15/07	1	J. R. REED 1121 N. 20 th AVE HOLLYWOOD, FLA 33020	I	RETIRED	J. R. CAS LOA			100.00
///								
///								
///								
///								
///								
///								
///								