

**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

Cover Period: From J.M.R. 1.1.07 To J.M.R. 3.31.07 Report Type 01
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 50.00

Loans \$ 0

Total Monetary \$ 50.00

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0

Transfers to Office Account \$ _____

Total Monetary \$ 0

(8) Other Distributions \$ J.M.R.

(9) TOTAL Monetary Contributions To Date
\$ 400.00

(10) TOTAL Monetary Expenditures To Date
\$ 6.30

(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.

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(Type name) J. R. REED
 Individual only for electioneering commun. Treasurer Deputy Treasurer

(Type name) J. R. REED
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

J. R. REED
Signature

J. R. REED
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

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

(3) Cover Period 1/1/09 through 3/31/09 (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
1/1	NONE				
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					