

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joshua H. Messinger

Name

(2) 220 Hopkins Street

Address (number and street)

Neptune Beach, Florida 32266

City, State, Zip Code

☐ Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Neptune Beach City Council 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 07 / 28 / 18 To 08 / 10 / 18 Report Type: 2018-P2

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 32 . 10

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

Total Monetary \$ _____ , _____ , 32 . 10

(8) Other Distributions

\$ 0 , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 8 , 306 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 2 , 602 . 95

(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) Sybil B. Ansbacher

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Sybil B. Ansbacher
Signature

(Type name) Joshua H. Messinger

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Joshua H. Messinger
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joshua H. Messinger

(2) I.D. Number _____

(3) Cover Period 07 / 28 / 2018 through 08 / 10 / 2018

(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					
07 / 31 / 18	Stitches and Screens 1930 Mayport Road Atlantic Beach, FL 32233	Printed material	CAN		32.10
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Joshua H. Messinger (2) I.D. Number _____

(3) Cover Period ⁰⁷ / ²⁸ / ¹⁸ through ⁰⁸ / ¹⁰ / ¹⁸ (4) Page ¹ of ¹

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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Total Monetary \$ _____ , _____ , 32 . 10

(8) Other Distributions

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(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 8 , 306 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 2 , 603 . 95

(11) Certification

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

(Type name) Sybil B. Ansbacher

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Sybil B. Ansbacher
Signature

(Type name) Joshua H. Messinger

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Joshua H. Messinger
Signature