CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Reeta Nielly Mills
Name

(2) 5228 SW 21st Street
Address (number and street)

West Park, FL 33023
City, State, Zip Code

☐ Check here if address has changed

OFFICE USE ONLY

RECEIVED OCT 24 2014

(3) ID Number:

(4) Check appropriate box(es):

☑ Candidate Office Sought: City Commission Seat 2

☐ 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 10 / 04 / 14 To 10 / 17 / 14 Report Type: 2014 G6

☑ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$ ___ , ___ , 401 . ___
Loans	$ ___ , ___ , ___ . ___
Total Monetary	$ ___ , ___ , 401 . ___
In-Kind	$ ___ , ___ , ___ . ___

(7) Expenditures This Report

Monetary Expenditures	$ ___ , ___ , 80 . ___
Transfers to Office Account	$ ___ , ___ , ___ . ___
Total Monetary	$ ___ , ___ , 80 . ___

(8) Other Distributions

$ ___ , ___ , ___ . ___

(9) TOTAL Monetary Contributions To Date

$ ___ , ___ , 963 . ___

(10) TOTAL Monetary Expenditures To Date

$ ___ , ___ , 742 . 77

(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) Abbla Akoni

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

X
Signature

(Type name) Reeta Nielly Mills

☑ Candidate ☐ Chairperson (only for PC and PTY)

X Reeta Nielly Mills
Signature

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Reeta Nielly Mills **(2) I.D. Number**

(3) Cover Period 10/04/14 through 10/17/14 **(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 Type	(8) Contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amou
10/17/14 1	Reeta Nielly Mills 5778 SW 21st St West Park FL	S	accountant	CAS			401
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DS-DE 13 (Rev. 08/03) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Reeta Nolley Mills (2) I.D. Number

(3) Cover Period 10/04/14 through 10/12/14 (4) Page 1 of 1

(5) Date / (6) Sequence Number	(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
10/09/14 / 1	Easy Copy 2727 S State Rd 7 West Park FL 33023	Copies	CAN		40.00
10/14/14 / 2	Easy Copy 2727 S. State Rd 7 West Park FL 33023	Copies	CAN		40
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DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES