

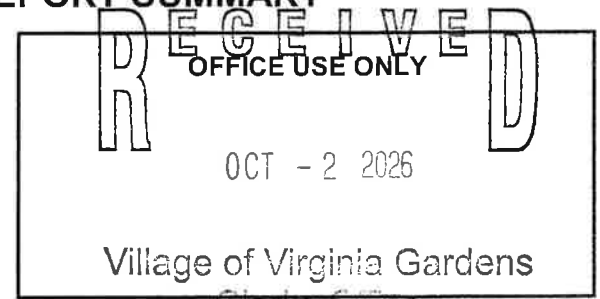
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Tim Boylan
Name

(2) 6111 N.W. 38 St
Address (number and street)

V/G FL 33166
City, State, Zip Code

☐ Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: _____

☐ 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 07/01/2026 To 10/02/2026 Report Type: 2026-6-1

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , 1 , 000 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ 0 , 1 , 000 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ 0 , 0 , 240 . 36

Transfers to Office Account \$ _____ , _____ , 30 . 00

Total Monetary \$ _____ , _____ , 739 . 67

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 0 , 1 , 000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ 0 , 0 , 260 . 36

(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) Timothy R Boylan

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

X Timothy R Boylan
Signature

(Type name) _____

☐ Candidate ☐ Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Tim Boylan

(2) I.D. Number _____

(3) Cover Period 07/01/26 through 10/02/26

(4) Page 1 of _____

(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					
08/24/26	Village of VIRGINIA GARDENS	Election Assessment	CAN	N/A	\$210.36
08/11/26	Village of VIRGINIA GARDENS	Qualifying Fee	CAN	N/A	\$50.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Tim Boylan (2) I.D. Number _____

(3) Cover Period 07/01/2020 through 10/02/20 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
08/04/20	Tim Boylan 611 NW 38th St Virginia Gardens	S	Candidate	Donation own campaign	/		\$1000.00
/ /							
/ /							
/ /							
/ /							
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