CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Jerry Smith	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1187213]							
(2) <u>609 Georgia Ave</u> Address (number and street)	Submitted on:							
Address (number and street) Mexico Beach, FL 32456	4/22/2019 14:52:01 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 434							
(4) Check appropriate box(es):								
 Candidate Office Sought: <u>Mexico Beach Council Group 2</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 								
(5) Report Identifiers								
Cover Period: From <u>4</u> / <u>12</u> / <u>2019</u> To	7 / <u>15</u> / <u>2019</u> Report Type: <u>MTR</u>							
🖾 Original 🔄 Amendment 🔄 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$, , , 000	Monetary Expenditures \$, , , , , 75							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,0 00							
Total Monetary \$	Total Monetary \$,,,,,							
······································	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>1</u> , <u>850</u> . <u>09</u>	\$, <u>1</u> , <u>850</u> . <u>09</u>							
(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)	(Type name)							
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
x	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number					
	4/12/2019			7/15/2019					
(3) Cover Perio	od / /	thro	ough	<i>II</i>	(4) Page	e <u> </u>	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
/ /									
1 1									
/ /									
1 1									
1 1									
/ /									
1 1									
1 1									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Jerr	CAMPAIGN TREASURER'S y Smith		PORT – ITEMIZED EXPENDITURES (2) I.D. Number			
	4/12/2019 7 i / / through	/15/2019	, 4) Page <u>1</u>		1	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Purpose (add office sought if contribution to a	(9) Expenditure	(10)	(11)	
Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount	
4/22/2019	smith, jerry 609 georgia ave mexico beach, fl 32456	partial loan repayment	MO		\$14.75	
//						
_ / /						
_ / /						
_ / _						
_ / _						
11						

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES