CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Kamren Stowers	OFFICE USE ONLY						
` '	Name	ONLINE SUBMISSION						
(2)	1440 Edgewood Avenue West; #9351							
	Address (number and street)	Submitted on: 9/3/2022 13:34:15 (eastern)						
	Jacksonville, FL 32208	——————————————————————————————————————						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1105						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: City Council	District 9						
	Political Committee (PC)	¬ o						
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)	•						
	(5) Report	Identifiers						
Cove	er Period: From 8 / 1 / 2022 To							
	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	h & Checks \$ , , 0 . 00	Monetary Expenditures \$ , , 396 . 77						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to						
Marris III II	•	Office Account \$ , , 0 . 00						
Tota	I Monetary \$ , ,000	T ( ) N ( ) ( )						
	•	Total Monetary \$ , , <u>396</u> . <u>77</u>						
In-Ki	ind \$,, <u>0</u> . <u>00</u>							
		(8) Other Distributions						
		\$ , , <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$ , 5, 238. 50	\$, <u>2</u> , <u>032</u> . <u>11</u>						
	(11) Cert							
	It is a first degree misdemeanor for any pers	. , , ,						
I certify that I have examined this report and it is true, correct, and complete:								
(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	gnature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Kamren Stowers				2) I.D. Numbe	er <u>1</u>	105
	8/1/2022		8	/31/2022			
(3) Cover Perio	od//	thro			(4) Pag	e <sup>1</sup>	of <sup>0</sup>
(IS A	*	<del></del>	-		, , ,	\$ \$\frac{1}{2}	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(10)	X 12	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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or 55							
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _F	Kamren	Stower	rs				 (2) I.D. Nur	nber	-	1105	
		8/1/20	22		8/31/20	022		-			
(3) Cover P	eriod	I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)	
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount	
8/31/2022	Print Place, 1130 Ave H East Arlington, Te 76011	flyers	MO	Add	\$396.77	
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DS-DE 14 (Rev	L					