	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Jim Overton	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION								
(2)	3751 Oak Point Ave.	[1290862]								
	Address (number and street)	Submitted on: 1/17/2023 16:05:33 (eastern)								
	Jacksonville, FL 32210									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1117								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: Tax Collector</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From $1 / 1 / 2023$ To	1 / 13 / 2023 Report Type: F1								
⊠ o		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$ , , ,000	Monetary								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$,,,000	Total Monetary \$ ,11 , <u>070</u> . <u>60</u>								
In-Ki	nd \$ , , 0 . 00									
		(8) Other Distributions \$ , , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>11</u> , <u>871</u> . <u>85</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:										
(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		×								
Sig	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jim Overton				2) I.D. Numbe	er <u>1</u>	117
	1/1/2023		1	/13/2023			
(3) Cover Perio	od///	thro			(4) Pag	e <sup>1</sup>	of <sup>0</sup>
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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(15)	X : 17	(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
11001	Only, State, Elp State	1,700	o coapadon	.,,,,,,	Becompain		2 11110001110
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name <u>J</u>	Jim Overton						(2) I.D. Number				1117		
		1/	1/20	23		1/13/2	023						
(3) Cover Pe	erioc	ľ	1	1	through	1	1		(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
1/11/2023	Supervisor of Elections, 105 E Monroe St Jacksonville, FL 32202	qualifying fee	MO		\$11,070.60
1	Udeksonville, FL 32202				
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DS-DE 14 (Rev.	11/13 }				