

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kim Stephens Perry  
 Name  
 (2) P.O. Box 66058  
 Address (number and street)  
Jacksonville, FL 32208  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1293340]  
 Submitted on:  
 2/24/2023 12:51:28 (eastern)

Check here if address has changed (3) ID Number: 1194

(4) Check appropriate box(es):  
 Candidate Office Sought: City Council District 10  
 Political Committee (PC)  
 Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded  
 Party Executive Committee (PTY)  Check here if PTY has disbanded  
 Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 2 / 11 / 2023 To 2 / 17 / 2023 Report Type: F4  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,   3   , 000 . 00  
 Loans \$        ,        ,   0   . 00  
 Total Monetary \$        ,   3   , 000 . 00  
 In-Kind \$        ,        ,   0   . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 480 . 02  
 Transfers to Office Account \$        ,        ,   0   . 00  
 Total Monetary \$        ,        , 480 . 02

**(8) Other Distributions**  
 \$        ,        ,   0   . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        ,   19   , 053 . 04

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,   16   , 203 . 72

### (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) \_\_\_\_\_  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer  
**X** \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)  
**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Kim Stephens Perry (2) I.D. Number 1194  
 (3) Cover Period 2/11/2023 through 2/17/2023 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
2/17/2023 / /	Perry, Kim 501 Estes Rd Jacksonville, FL 32208	S	it project manager	CH	loan		\$3,000.00
1							
/ /							
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kim Stephens Perry

(2) I.D. Number 1194

(3) Cover Period 2/11/2023 through 2/17/2023

(4) Page 1 of 1

(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					
2/13/2023 //	Harveys#1692, 5250 Moncrief road Jacksonville, fl 32209	gift cards	MO		\$102.79
1					
2/14/2023 //	US Post Master, 10700 Beach Blvd jacksonville, fl 32246	postage for mailers	MO		\$377.23
2					
//					
//					
//					
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//					
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