	CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Rodney Jones	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	1211 Santa Fe Circle	Submitted on:							
	Address (number and street)	6/8/2020 12:55:48 (eastern)							
	Pensacola, FL 32505								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 633							
(4)	Check appropriate box(es):								
	Candidate Office Sought: City Council, District 5								
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ 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	t Identifiers							
Cov	` ' '								
	er Period: From $\frac{1}{2}$ / $\frac{1}{2020}$ To								
Цο	Original Amendment Special Election Report								
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Casl	Cash & Checks \$,,, Expenditures \$,,,								
•	c 0.00								
Loar	oans \$,, <u>0</u> . <u>00</u> Transfers to Office Account \$								
Tato	Office Account \$, , ,								
10เล	al Monetary \$, , 0 . 00	Total Monetary \$. 0 . 00							
L. IZ	• • • • •	Total Monetary \$, , , 0 . 00							
In-Ki	ind \$,,,0 . 00	(a) Other Distributions							
		(8) Other Distributions \$, , 0.00							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,2, _10000	\$, , <u>0</u> . <u>00</u>							
	(11) Cert It is a first degree misdemeanor for any pers	tification							
Ic	certify that I have examined this report and it is true, com	ect, and complete:							
_(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
Si	ignature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Rodney Jones (2) I.D. Number 633							33
	1/1/2020 od///		1	/31/2020 ///	(4) Pag	e <u>1</u>	of _0
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9)	(10)	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Allendirent	Amount
1 1							
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1 1							
1 1							
1 1							
, ,							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

Name Rodney	1/1/2020 1/	31/2020	2) I.D. Number 633		
Cover Period _	/through	_//(2	l) Page <u>1</u>	of _	0
(5) Date (6) Sequence Number	(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)	(11)
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/ /					