	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Larry D. Jones Name	OFFICE USE ONLY ONLINE SUBMISSION							
(2)	Protected Address	[1115733]							
	Address (number and street)	Submitted on:							
	ı	7/29/2016 21:17:21 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:337							
(4)									
	☐ Candidate Office Sought: Sheriff								
	☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed								
(5) Report Identifiers									
Cove	er Period: From $\frac{7}{2}$ / $\frac{9}{2016}$ To	7 / <u>22</u> / <u>2016</u> Report Type: <u>P3</u>							
<u>X</u> 0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	n & Checks \$,, <u>90</u> . <u>00</u>	Monetary Expenditures \$, , , 0 . 00							
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 90 . 00	Total Monetary \$, 0 . 00							
In-Ki	ind \$,,,000								
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>7</u> , <u>610</u> . <u>00</u>	\$, <u>6</u> , <u>614</u> . <u>68</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:									
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		Χ							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number							
(3) Cover Peri	7/9/2016 od///	5		//22/2016 //	(4) Pag	(4) Page1	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	833	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/16/2016	Lynch, Diana 271 17th Street, NW ste 53 Atlanta, GA 30363		school teacher	СН			\$40.0
7/16/2016	Palm Coast Community Center, Recreation 160 Lake Avenue Palm Coast, FL 32164	0	business	RE			\$50.0
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES							
1) Name <u>Larry</u>	Larry D. Jones			(2) I.D. Number		337	
	7/9/2016	7/	22/2016				
Cover Period _		_through	_// (4) Page <u>1</u>	of _	0	
(5)	(7)		(8)	(9)	(10)	(11)	
Date	Full Name (Last, Suffix, First, Middle)		Purpose	3 856	8 8		
(6)			(add office sought if	f			
(6)			` a a walle visit a war a	Evpenditure			

(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
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