CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Sims E Jones	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1209913]						
(2) <u>114 Boulder Rock Dr.</u>	Submitted on:						
Address (number and street) Palm Coast, FL 32137	6/10/2020 18:11:25 (eastern)						
City, State, Zip Code	—						
☐ Check here if address has changed	(3) ID Number: 494						
(4) Check appropriate box(es):							
Candidate Office Sought: Palm Coast Ca	ty Council Member Seat 1						
Political Committee (PC)							
Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
 Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an 	 Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 						
individual making electioneering communications)							
(5) Repor	t Identifiers						
Cover Period: From 5 / 1 / 2020 To							
	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , 100 . 00	Expenditures \$ _ , _ , 0 . 00						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to						
±	Office Account \$,, 0 . 00						
Total Monetary \$,, <u>100</u> .00	Total Monetary \$. 0.00						
In-Kind \$,,0.00	Total Monetary \$, , , 00						
	(8) Other Distributions						
	\$,,000_						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>200</u> . <u>00</u>	\$,, <u>23</u> . <u>18</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:							
(Type name)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	<u>X</u>						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sims E Jones	(2) I.D. Number						
	5/1/2020	5/31/2020						
(3) Cover Per	iod / /	three			(4) Pag	e	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &	c	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
5/28/2020	jones, philippa 114 Boulder rock dr. palm coast, fl 32137	I	retired	CA			\$50.0	
1	iones sims e	I	retired	CA			\$50.0	
5/28/2020 / /	jones, sims e 114 boulder rock dr. palm coast, fl 32137		Leciled	CA			\$30.0	
2								
1 1								
1 1		~						
1 1								
1 1								
1 1								
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Sims E Jones</u> (2) I.D. Number <u>494</u>							
(3) Cover Period	5/1/2020 /through	5/31/2020 //	(4) Page <u>1</u>	of	0		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Purpose (add office sought if contribution to a	(9) Expenditure	(10)	(11)		
Sequence Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount		
_/ /							
//							
_/ /							
_/ /							

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