CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Juliette Jackson	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	72 Vencent Drive West	Submitted on:						
	Address (number and street)	8/17/2020 13:48:46 (eastern)						
	Midway, FL 32343							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:248						
(4)	Check appropriate box(es):							
	Candidate Office Sought: County Commis	sioner District 1						
	☐ 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	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cove	er Period: From 7 / 25 / 2020 To							
		ecial Election Report						
		<u> </u>						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , 522 . 00						
Loar	ns \$,,000	Transfers to						
		Office Account \$, , , 0 . 00						
Tota	I Monetary \$, , 0 . <u>00</u>							
		Total Monetary \$, , <u>522</u> . <u>00</u>						
In-Ki	nd \$,, <u>0</u> .00							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>4</u> , <u>005</u> . <u>00</u>	\$, <u>2</u> , <u>424</u> . <u>28</u>						
		tification						
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)						
х		X						
-	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Juliette Jackson				2) I.D. Numbe	er <u>2</u>	48
	7/25/2020 od//		7	/31/2020	(4) Pag	1	of ⁰
(5) Cover Ferro	Ju		Jugii		(4) Fay		01
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence Number	Street Address & City, State, Zip Code	Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Juliette	Jack	son				 (2) I.D. Nun	nber	2	248	
	7/	25/20	20		7/31/20	20					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
7/27/2020	D & M PRINT AND DESIGN, 150 South Lanier Road Havana, FL 32333	white 2 color shirts	МО	Add	\$250.00
1					
7/29/2020	J2 Strategies & solutions, LLC, 6099 Pat Thomas Hwy Quincy, FL 32351	palm cards	МО	Add	\$272.00
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