CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Jackson County Democratic Executive	Committee OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1189126]							
(2) P.O. Box 5853	Submitted on:							
Address (number and street) Marianna, FL 32447	6/30/2019 23:40:33 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number:131							
(4) Check appropriate box(es):								
Candidate Office Sought:								
<ul> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>Check here if PC or ECO has disbanded</li> <li>Check here if PTY has disbanded</li> <li>Check here if no other IE or EC reports will be filed</li> </ul>								
(5) Report Identifiers								
Cover Period: From <u>4</u> / <u>1</u> / <u>2019</u> To								
☐ Original ☐ Amendment ☐ Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , _50 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,,							
Total Monetary       \$	Total Monetary \$ , , _50 . 00							
	(8) Other Distributions							
	\$,, 00							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>105</u> , <u>498</u> . <u>63</u>	\$, <u>67</u> , <u>798</u> . <u>22</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	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name							
(3) Cover Perio	4/1/2019 od//	thro	6 bugh	/30/2019 //	(4) Pag	e _1	of _0	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Co	(8) pntributor	(9) Contribution	(10) In-kind	(11)	(12)	
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
1 1	-							
1 1	-							
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 Jackson County Democratic Executive Committee (2) I.D. Number 131								
(3) Cover Period	4/1/2019 6/ / through	30/2019 _// (4	4) Page <u>1</u>	of_	1			
(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) Amendment	(11) Amount			
	Kelly, Leon 3605 Bumpnose Rd. Marianna, Fl 32446	trip by eric to orlando	RM		\$50.00			
_/ /								
_/ /								
_/ /								

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