CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Jim Miller	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	**Protected**	Submitted on:							
	Address (number and street)	1/10/2020 15:32:36 (eastern)							
	Protected, City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 348							
(4)		(3) 1D Nulliber							
(4)	Check appropriate box(es):	Marshau Bistuist 2							
	☐ Candidate Office Sought: School Board☐ Political Committee (PC)	Member District 2							
	☐ 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 individual making electioneering communications)	Check here if no other IE or EC reports will be filed							
	(5) Report	Identifiers							
Cove	er Period: From $12 / 1 / 2019$ To	12 / 31 / 2019 Report Type: <u>M12</u>							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	n & Checks \$, , ,000	Expenditures \$, , 0 . 00							
	s \$, , 0.00								
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$							
Tota	I Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00							
Tota	,,,,,,	Total Monetary \$, 0 . 00							
In-Ki	nd \$, , 45.00	,, ,, ,							
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
(5)	\$,	\$,, 62787							
	, <u>31</u> , <u>100</u>	, <u> </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		×							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jim Miller		(2) I.D. Number					
	12/1/2019			2/31/2019				
(3) Cover Perio	od//	thro			(4) Page	e ¹	of ¹	
W.50 PA			1000					
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &		ontributor	Contribution	In-kind			
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount	
12/14/2019	Jim , Miller 1300 Citizen's Blvd	S	realtor	IK	300 copies		\$45.0	
J I	Leesburg, FL 34748							
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29 29								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Jim M	Jim Miller					(2) I.D. Number				348	
(3) Cover Period _	12/1/2 /	019 /	through	12/31/: /	2019 _//		(4) Page	1	of	0	
	· ·				1511			N/SO			

(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
Number		the section and thought the endowment with the			
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DS-DE 14 (Rev.			,		