

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jim Miller
 Name
 (2) ***Protected***
 Address (number and street)

 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1283255]

Submitted on:
 10/9/2022 19:51:17 (eastern)

Check here if address has changed (3) ID Number: 424

(4) Check appropriate box(es):

Candidate Office Sought: School Board Member District 2

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 9 / 24 / 2022 To 10 / 7 / 2022 Report Type: G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 38 . 52

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 38 . 52

(8) Other Distributions
 \$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$ _____ , 51 , 300 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , 18 , 313 . 01

(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) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Jim Miller (2) I.D. Number 424

9/24/2022 through 10/7/2022

(3) Cover Period ___ / ___ / ___ through ___ / ___ / ___ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jim Miller

(2) I.D. Number 424

(3) Cover Period 9/24/2022 through 10/7/2022

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
10/4/2022 / /	Charles Townsend Corp, 811 W North Blvd Leesburg, FL 34748	display sign	MO		\$38.52
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