	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Tammy Jones	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION [1303953]					
(2)	7250 NE 91st Ter	Submitted on:					
	Address (number and street)	3/29/2024 15:47:52 (eastern)					
	Bronson, FL 32621 City, State, Zip Code						
	☐ Check here if address has changed	(3) ID Number: 294					
(4)	Check appropriate box(es):	(6) 15 (4)					
(")	☐ Candidate Office Sought: Supervisor of	Elections					
	Political Committee (PC)	Biccolons					
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
		☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)	Check here it no other is or so reports will be liled					
	,,,,	Identifiers					
Cove	er Period: From $\underline{1}$ / $\underline{1}$ / $\underline{2024}$ To	3 / 31 / 2024 Report Type: <u>Q1</u>					
X O	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Cash	h & Checks \$, , , 55_	Expenditures \$, , <u>41</u> . <u>14</u>					
1 20"	s 0 00	To a Company					
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$					
Tota	al Monetary \$, , 45 . 55	Office Account \$, , , 0 . 00					
TULA	,,,,	Total Monetary \$, , 41 . 14					
In-Ki	ind \$, , 0.00	,,					
III IX	, , , , ,	(8) Other Distributions					
	1	\$,, ooo					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>545</u> . <u>55</u>	\$,, <u>241</u> 40_					
	(11) Cert	l tification					
	It is a first degree misdemeanor for any person						
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	☐ Candidate ☐ Chairperson (only for PC and PTY)					
or	electioneering comm.)						
х		×					
	ignature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Tammy Jones				2) I.D. Numbe	er	94
	1/1/2024			/31/2024			
(3) Cover Perio	od//	thro			(4) Pag	e ¹	of ¹
		_	1000	·		22. V 	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		()				
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
1 /0 /0004	Seacoast Bank,		refund	RE	e ar		\$45.5
1/9/2024	331 E Hathaway Ave Bronson, FL 32621		maintenand				
	Bronson, FL 32621		e fee				
1							
F 3							
1 1							
1 1							
1							
1							
I E							
j a							
J I	-						
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Cammy	Jones		110					 (2) I.D. Nun	nber	2	294	an an
		1/1/2	02	4		3/3	31/20	24		-			
(3) Cover Po	eriod	I		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
1/11/2024	Seacoast Bank, 331 E Hathaway Ave Bronson, FL 32621	maintenance fee	МО		\$15.14
1					
2/13/2024	Seacoast Bank, 331 E Hathaway Ave Bronson, FL 32621	maintenance fee	MO		\$13.00
3/12/2024	Seacoast Bank, 331 E Hathaway Ave Bronson, FL 32621	maintenance fee	МО		\$13.00
//					
//					
//					
//					
//					
DS-DE 1/ /Pov	<u>.</u>	4	l.	L	