CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Jaime Matos	OFFICE USE ONLY						
•	Name	ONLINE SUBMISSION [1216173]						
(2)	PO Box 450967							
	Address (number and street)	Submitted on: 7/13/2020 11:30:25 (eastern)						
	Kissimmee, FL 34745	//15/2020 11:50:25 (Cabccin,						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 382						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: Supervisor of	Elections						
	Political Committee (PC)	Check have if BC as ECO has dishanded						
		☐ Check here if PC or ECO has disbanded☐ 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		7 / 10 / 2020 Report Type: P3						
		ecial Election Report I						
(6)	Contributions This Report	(7) Expenditures This Report						
Cael	h & Checks \$, , 200 . 00	Monetary Expenditures \$, , 783 . 84						
Ous.	,,,,,,,,,	,, ,,						
Loar	ns \$,,, <u>0</u> . <u>00</u>	Transfers to						
		Office Account \$, , 0 . 00						
Tota	Il Monetary \$, , <u>200</u> . <u>00</u>							
		Total Monetary \$, , 783 . 84						
In-Ki	ind \$,,,000							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
`,	\$, _11_, _72460	\$, _10_, _30210_						
	· ·	· / /						
(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:								
(T)	ype name)	(Type name)						
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		X						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name		(2) I.D. Number						
	6/27/2020		7	/10/2020		1	1	
(3) Cover Perio	od///	thro	ough	11_	(4) Pag	e <u>1</u>	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
7/10/2020	Attorney Liaison Services, P.O. Box 621803		attorney	CH			\$200.0	
1	Orlando, FL 32862							
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DS-DE 13 (Rev. 11/1	3)	SEE DE	VERSE FOR I	INSTRUCTIONS	S AND CODE VAL	IIES		
DO-DE 13 (KeV. 11/1.	J	SEEKE	VERSE FUR I	INO I KUC I IUNS	AND CODE VAL	UEO		

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jaime	Matos					_ (2) I.D. Nun	nber		382	
	6/27/2	020		7/10/20	20					
(3) Cover Period	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
6/27/2020	Sunshine Printing, 1218 Dyer Blvd Kissimmee, FL 34741	signs	МО		\$741.95
1					
7/10/2020	Home Depot, 2601 W. Vine Street Kissimmee, FL 34741	building materials for signs.	МО		\$41.89
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DS-DE 14 (Rev	<u></u>				