CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Jim Shive	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1203288]								
(2)	37750 Southview Ave Address (number and street)	Submitted on:								
	Dade City, FL 33525	4/6/2020 09:45:08 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 1180								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: DC City Commission Group 3 ☐ Political Committee (PC) ☐ 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) 									
(5) Report Identifiers										
Cove	er Period: From 3 / 28 / 2020 To	4 / 9 / 2020 Report Type: G3								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , ,000	Monetary								
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$,,,0 . 00								
Total Monetary \$, , 0 . 00		Total Monetary \$, , <u>160</u> . <u>50</u>								
In-Ki	and \$,,,0 . 00									
		(8) Other Distributions \$, , <u>0</u> 00								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>4</u> , <u>799</u> . <u>33</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:										
_(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jim Shive				2) I.D. Numbe	er <u>1</u>	180
(3) Cover Perio	3/28/2020 od///	thro	ough	/9/2020 //	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contributor		(9)	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
l l							
J I							
1 1							
j j							
J J							
J I							
1 1							
J I							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) NameJim Shive						 (2) I.D. Number			1180		
	3/28/2	020		4/9/202	0						
(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
3/31/2020	Tampa Type Print, 12216 U.S. Hwy 301 Dade City, Fl 33525	campaign literature	MO		\$160.50
1	bade City, FI 33323				
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DS-DE 14 (Rev					