CAMPAIGN 1	TREASURER'S REPORT SUMMARY							
(1) Jason English  Name  (2) PO Box 3609  Address (number and street)  Milton, FL 32572	OFFICE USE ONLY ONLINE SUBMISSION [1298706] Submitted on: 7/13/2023 12:33:39 (eastern)							
City, State, Zip Code  Check here if address has change	nged (3) ID Number: 163							
(4) Check appropriate box(es):    X Candidate Office Sought:   Clerk of Court and Comptroller     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)   Check here if no other IE or EC reports will be filed								
	(5) Report Identifiers							
Cover Period: From $\frac{4}{2}$ / $\frac{1}{2}$ / Original Amendment	/ 2023 To 4 / 30 / 2023 Report Type: M4							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$,,,	0 . 00       Monetary Expenditures       ,							
Total Monetary \$ ,	Total Monetary \$, 0 . 00							
	(8) Other Distributions \$ , 000							
(9) TOTAL Monetary Contributions 7								
I certify that I have examined this report a  (Type name)  Individual (only for IE Treasurer Dor electioneering comm.)	(Type name)  Deputy Treasurer							
X Signature	X Signature							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	1) Name				(2) I.D. Number					
	4/1/2023	/1/2023			4/30/2023					
(3) Cover Perio	od/	thro	ough	<i>II</i>	(4) Pag	e	of 0			
-										
(5)	(7)		(8)	(9)	(10)	(11)	(12)			
Date	Full Name									
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind					
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount			
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Jason	Englis	h				 (2) I.D. Nun	nber		163	3
	4/1/202	23		4/30/2	023					
(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
1	Office Depot, Hwy 90 Pace , Fl 32571	postage and supplies	МО	Delete	\$139.16
4/2/2023	Office Depot, 4930 Hwy 90 Pace , Fl 32571	postage and supplies	MO	Add	\$139.16
4/2/2023	Office Depot, Hwy 90 pace, fl 32571	copies	МО	Delete	\$155.79
4/2/2023	4930 Office Depot, Hwy 90 pace, fl 32571	copies	МО	Add	\$155.79
4/24/2023	Office Depot, Hwy 90 Pace, Fl 32571	postage	МО	Delete	\$63.00
4/24/2023	Office Depot, 4930 Hwy 90 Pace, Fl 32571	postage for mail outs	МО	Add	\$63.00
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