CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Sarah Jones	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1168502]							
(2)	44 Woodfield Drive	Submitted on:							
	Address (number and street)	8/17/2018 21:00:00 (eastern)							
	Port Orange, FL 32129								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:461							
(4)	Check appropriate box(es):								
	Candidate Office Sought: Port Orange	Council District 2							
	☐ 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	☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
(5) Report Identifiers									
Cove	er Period: From $8 / 4 / 2018$ To	0 8 / 10 / 2018 Report Type: P6							
X O	riginal Amendment Sp	pecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	n & Checks \$,,,00	Monetary							
Loar	s \$,, <u>0</u> .00	Transfers to Office Account \$, , 0 . 00							
Total Monetary \$, , , 00		Total Monetary \$, 3 , 277 . 16							
In-Ki	nd \$, , 0 . <u>00</u>								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
. ,	\$, 37, 449. 54	\$,35_, _51631_							
(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\	(Type name) (Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Sarah Jones				z) I.D. Numbe	<u> 4</u>	61
	8/4/2018		8	/10/2018		1	1
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	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
8/9/2018 / /	Neetz, Danielle 936 Chickadee Dr Port Orange , FL 32129	Ĭ		СН	-		\$20.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Saral	h Jones					(2) I.D. Nun	nber	•	461	200
	8/4/2	2018		8/10/2	018		-			
(3) Cover Period	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
8/6/2018	Barr, Fred 910 N Shine Ave Orlando , FL 32803	design & computer service	МО		\$875.00
8/6/2018	WePay, 350 Convention Way #200 Redwood City, CA 94063	payment processing	МО		\$2.16
8/4/2018	You Should Run, PO Box 3388 Winter Park, FL 32790	campaign services	МО		\$2,400.00
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DS-DE 14 (Rev					