

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jim Connell
 Name
 (2) 271 Tangerine Ave
 Address (number and street)
Lake Helen, FL 32744
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1293036]

Submitted on:
 2/16/2023 15:01:31 (eastern)

Check here if address has changed (3) ID Number: 911

(4) Check appropriate box(es):

Candidate Office Sought: Lake Helen Commission Zone 4

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 1 / 1 / 2022 To 2 / 6 / 2023 Report Type: TRG

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 100 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 100 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, , 100 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 100 . 00

(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:

(Type name) _____

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____

Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Jim Connell (2) I.D. Number 911

1/1/2022 through 2/6/2023

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jim Connell

(2) I.D. Number 911

(3) Cover Period 1/1/2022 through 2/6/2023

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
6/15/2022 //	City of Lake Helen, 327 S Lakeview Dr Lake Helen, FL 32744	qualifying fee	MO	Add	\$69.47
1					
6/23/2022 //	VC SOE, 1750 S Woodland Blvd DeLand, FL 32720	petitions	MO	Add	\$1.80
2					
2/6/2023 //	Connell, Jim 271 Tangerine Lake Helen, FL 32744	repay loan - close out account	MO	Add	\$28.73
3					
//					
//					
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