CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Jake Johansson	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	6611 Merryvale Lane	Submitted on:						
	Address (number and street)	4/18/2022 11:19:32 (eastern)						
	Port Orange, FL 32128							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:808						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: County Counci	1 At Large						
	☐ 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	t Identifiers						
Cove	er Period: From 2 / 1 / 2022 To							
		ecial Election Report						
		T						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	h & Checks \$, , ,000	Monetary						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to						
	0.00	Office Account \$, , , 0 . 00						
Tota	l Monetary \$, ,000	T-(IM) (
	•	Total Monetary \$, ,200. 00						
In-Ki	ind \$,, <u>0</u> . <u>00</u>							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, 43, 005. 04	\$, 12 , 476 . 41						
		tification						
		on 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)						
Х		×						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jake Johansson				2) I.D. Numbe	er <u>8</u>	0.8
	2/1/2022		2	/28/2022		-	0
(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
1 1							
J I							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	ake	Johanss	on			, , , , , , , , , , , , , , , , , , ,	 (2) I.D. Nun	nber	8	308	
		2/1/20)22		2/28/2	022		-			
(3) Cover Pe	eriod	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
2/27/2022	Port Orange Community Trust, 1999 City Center Circle Port Orange , FL 32129	spring festival booth	MO	Delete	\$200.00
2/27/2022	Port Orange Community Trust, 1999 City Center Circle Port Orange , FL 32129	spring festival booth	МО	Add	\$0.00
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DS-DE 14 (Rev	4440 1				