

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sarah Soule Jones  
 Name

(2) 44 Woodfield Drive  
 Address (number and street)

Port Orange, FL 32129  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1297791]

Submitted on:  
 7/3/2023 13:59:00 (eastern)

Check here if address has changed

(3) ID Number: 950

(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 individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 6 / 17 / 2023 To 6 / 30 / 2023 Report Type: P2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 410 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 410 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 333 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 333 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 3 , 230 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 889 . 83

### (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 Sarah Soule Jones (2) I.D. Number 950  
 6/17/2023 through 6/30/2023  
 (3) Cover Period / / through / / (4) Page 1 of 1

(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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
6/17/2023 / /	Morris, John 1116 Southwinds Dr Port Orange, FL 32129	I		CH			\$100.00
1							
6/23/2023 / /	Davis, Mario 1256 Bramley Lane Deland, FL 32720	I		CH			\$100.00
2							
6/26/2023 / /	Thripp, Richard 265 Hickory Ave Orange City, FL 32763	I		CH			\$100.00
3							
6/26/2023 / /	Guenthner, Sue 2929 Sabal Palm Dr Edgewater, FL 32141	I		CA			\$10.00
4							
6/26/2023 / /	Democratic Disability Caucus, Volusia 936 Chickadee Dr Port Orange, FL 32127	O		CH			\$100.00
5							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sarah Soule Jones

(2) I.D. Number 950

(3) Cover Period 6/17/2023 through 6/30/2023

(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) Sequence Number					
6/26/2023 //	US Postal Service, 725 Dunlawton Ave Port Orange, FL 32127	postage	MO		\$333.00
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