CAMPAIGN TREASURER'S REPORT SUMMARY	
11) Kimberly Jackson	OFFICE USE ONLY
Name 14967 SW 171St Avenu Address (number and street) Indiantown, M 34950	JUN 29 '20 PM 3:15
City, State, Zip Code	(2) ID Number:
Check here if address has changed (4) Check appropriate box(es):	(3) ID Number:
Candidate Office Sought:	
(5) Report Identifiers	
Cover Period: From 6 1 1 1 20 To 6 1 12 1 20 Report Type: 6-1	
☐ Original ☐ Special Election Report	
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$,,	Monetary Expenditures \$, , , ,
Loans \$,,150.00	Transfers to Office Account \$,, &
Total Monetary \$,, 150 - 00	Total Monetary \$,,,
In-Kind \$,, \(\begin{align*} \begin{align*} \ldots & \l	(9) Other Digtributions
	(8) Other Distributions \$,,
(9) TOTAL Monetary Contributions To Date \$,,	(10) TOTAL Monetary Expenditures To Date \$,, /OO DO
(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) Candile DelionS ☐ Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer	(Type name) KIMBERU > GCKSM DCandidate □ Chairperson (only for PC and PTY)
☐ Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Champelson (Only for PC and P 11)
x Choo	* Tymberly S. Jacks
Signature	Signature /

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS