

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kimberly Jackson

Name

(2) 14967 SW 171ST Avenue

Address (number and street)

Indiantown, FL 34956

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Council Member SEAT 1

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

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

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

OFFICE USE ONLY

JUN 29 '20 PM 3:15

(5) Report Identifiers

Cover Period: From 06 / 13 / 2020 To 06 / 26 / 2020 Report Type: G2

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . _____

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0 . 00

Transfers to Office Account \$ _____ , _____ , 0 . _____

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 150 . 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) Candice Delions

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

X

Signature

(Type name) Kimberly Jackson

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature