

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CHRIS SIMMONS
Name

(2) 179 TOSEAVILLA BLVD
Address (number and street)

NORTH VEVOICE, FL 34275
City, State, Zip Code

OFFICE USE ONLY

SEP 8 '21 PM 2:04

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY COUNCIL - SEAT 4
- 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

(5) Report Identifiers

Cover Period: From 08/19/21 To 08/31/21 Report Type: 2021M8

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 120.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 102.00

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 102.00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 120.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 102.00

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

Signature

(Type name) CHRIS SIMMONS
 Candidate Chairperson (only for PC and PTY)

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Chris Simmons (2) I.D. Number _____

(3) Cover Period 08/19/21 through 08/31/21 (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		Amount
08/19/21	Chris S. Simmons 179 Roseville Blvd North Venice, FL 34275	S	Candidate	CAS			\$120 ⁰⁰
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Chris Simmons (2) I.D. Number _____

(3) Cover Period 08/19/21 through 08/31/21 (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					
08/19/21	City of Venice	Qualifying Fee	MON		\$10200
11					
11					
11					
11					
11					
11					
11					
11					