CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) ChRIS SIMMONS	OFFICE USE ONLY							
Name	$\overline{U_{U_0}Q}$							
(2) 179 (050AV)//A B/ Address (number and street)	<u>VCV</u> OCT 22 '21 PN3:1							
North Venice, to 340	275							
City, State, Zip Code								
Check here if address has changed	(3) ID Number:							
(4) Check appropriate box(es):								
Political Committee (PC)								
☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY)								
☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From 10 1 2 1 21 To 10 1 15 1 21 Report Type: 2021 G2								
☐ Original ☐ Amendment ☐ Special Election Report								
(6) Contributions This Report	(7) Expenditures This Report 331.26							
Cash & Checks \$, ,	Monetary Expenditures \$, 327.88							
Loans \$, , .	Transfers to							
toans + , ,	Office Account \$, , .							
Total Monetary \$, ,								
ф	Total Monetary \$, ,							
In-Kind \$, ,	(8) Other Distributions							
	(8) Other Distributions \$,							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, , <u>470</u> 00	\$, 450.30							
	453,586							
(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) ARIS SIMMONS	(Type name) DRIS SIMMONS							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	☐ Chairperson (only for PC and PTY)							
or electioneering com/h.)								
X	X							
Signature Signature	Signature OFF PEVEDOE FOR MOTEURE							
DS-DE 12 (Rev. 11/13)	SEE REVERSE FOR INSTRUCTIONS							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	MR15 011	ч м с	7N5	(2)	I.D. Number				
(3) Cover Period 10102121 through 10115121 (4) Page of									
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9)	(10)	(11)	(12)		
Sequence Number	City, State, Zip Code	Туре	I	Type	In-kind Description	Amendment	Amount		
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

DS-DE 13 (Rev. 11/13)

(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
10/07/21	North Venice FL	VISTAPRINT SIGNS, DOSTEES + DOORLANGERS	RMB		# 327.88
10/04/31	PAY PAI 2211 N. 157 St. SAN POSE, CA 95131	Transaction Fe e			¢3.38
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