

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Chris Simmons  
Name

(2) 179 Tosca Villa Blvd  
Address (number and street)  
North Venice, FL 34275  
City, State, Zip Code

**OFFICE USE ONLY**

NOV 29 '21 PM 06

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: Venice 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** 19

Cover Period: From 10 / 29 / 21 To 11 / 2 / 21 Report Type: TR

- Original       Amendment       Special Election Report

**(6) Contributions This Report**

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

Loans      \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

Total Monetary      \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

In-Kind      \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

**(7) Expenditures This Report**

Monetary Expenditures      \$ \_\_\_\_\_, \_\_\_\_\_, 16.42 00

Transfers to Office Account      \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

Total Monetary      \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

**(8) Other Distributions**

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_, \_\_\_\_\_, 470.00

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_, \_\_\_\_\_, 470.00

**(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

(Type name) Chris Simmons

Candidate       Chairperson (only for PC and PTY)

[Signature]

X  
Signature

[Signature]

X  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Chris Simmons (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10/29/21 through 11/2/21 (4) Page 1 of 1

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor |            | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-------------|--|--------------------|------------|-----------------------------|--------------------------------|-------------------|----------------|
|             |  | Type               | Occupation |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |
| / /         |  |                    |            |                             |                                |                   |                |

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name CHRIS SIMMONS

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 10, 28, 21 through 11, 2, 21

(4) Page 1 of 1

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|-------------|--|--|----------------------------|-------------------|----------------|
| 10/31/21    | SABAL PALM BANK<br>735 E. VENICE<br>VENICE, FL 34285   | Monthly<br>Fee   | CHE                        |                   | \$15           |
| 11/17/21    | CITY OF VENICE<br>401 W. VENICE AVE<br>VENICE, FL  | TRANSFER<br>of<br>unobligated<br>funds                                     | CHE                        |                   | \$1.42         |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |