# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Patrick Shawn Jones
Name

(2) 944 New York Ave Apt. B
Address (number and street)
Lakeland, Florida 33803
City, State, Zip Code

☐ **Check here if address has changed**

OFFICE USE ONLY
RECEIVED
DEC 07 2018
City Clerk's Office

(3) ID Number: _____

(4) Check appropriate box(es):

☑ Candidate Office Sought: City Commissioner SW District
☐ 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 11 / 26 / 2018 To 11 / 30 / 2018 Report Type: M2

☑ Original ☐ Amendment ☐ Special Election Report

**(6) Contributions This Report**

| | |
|---|---|
| Cash & Checks | $ 322.33 |
| Loans | $ |
| Total Monetary | $ 322.33 |
| In-Kind | $ |

**(7) Expenditures This Report**

| | |
|---|---|
| Monetary Expenditures | $ 322.33 |
| Transfers to Office Account | $ |
| Total Monetary | $ 322.33 |

**(8) Other Distributions**
$

**(9) TOTAL Monetary Contributions To Date**
$ 322.33

**(10) TOTAL Monetary Expenditures To Date**
$ 322.33

**(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) Patrick Shawn Jones
☐ Individual (only for IE or electioneering comm.) ☑ Treasurer ☐ Deputy Treasurer
X _____
Signature

(Type name) Patrick Shawn Jones
☑ Candidate ☐ Chairperson (only for PC and PTY)
X _____
Signature



SEE REVERSE FOR INSTRUCTIONS

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** Patrick Shawn Jones **(2) I.D. Number** _____

**(3) Cover Period** 11 / 26 / 2018 through 11 / 30 / 2018 **(4) Page** 1 of 1

| (5) Date / (6) Sequence Number | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor Type | (8) Contributor Occupation | (9) Contribution Type | (10) In-kind Description | (11) Amendment | (12) Amount |
|---|---|---|---|---|---|---|---|
| 11 / 28 / 2018<br>01 | Carol A. Vorholzer<br>1623 Lawton Ln.<br>Lakeland, Florida<br>33803 | I | Retired | CHE | | | 250.00 |
| 11 / 28 / 2018<br>02 | Russell Villarete<br>3955 West Campbell Rd.<br>Lakeland, Florida<br>33810 | I | R.N. | CAS | | | 50.00 |
| 11 / 28 / 2018<br>03 | Jonathan Freema<br>944 New York Apt. B<br>Lakeland, Florida<br>33801 | I | Food Service | CAS | | | 22.33 |
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

**(1) Name** Patrick Shawn Jones **(2) I.D. Number** _____

**(3) Cover Period** 11 / 26 / 2018 **through** 11 / 30 / 2018 **(4) Page** 1 **of** 1

| (5) Date / (6) Sequence Number | (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 |
|---|---|---|---|---|---|
| 11 / 28 / 2018<br>01 | City Of Lakeland<br>219 N. Massachusetts Avenue<br>Lakeland, Florida<br>33801 | Qualifying Fee | ~~CAN~~ MON PSJ | | 322.33 |
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