CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1) Jim my Earl Peacoch Name (2) 16549 Lowry Rd.	10/28/24					
Address (number and street) Address (number and street) City, State, Zip Code						
	de Town Council					
☐ 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						
	Identifiers					
Cover Period: From 16 / 12 / 29 To	0 / 25 /24 Report Type:					
☐ Original ☐ Amendment ☐ Spe	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$	Monetary Expenditures \$					
Loans \$,	Transfers to Office Account \$,,					
Total Monetary \$,	Total Monetary \$,,					
In-Kind \$,,						
	(8) Other Distributions \$,,					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date \$,, 963.23					
(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, corr	^					
(Type name) Jim Mi For Peacoch ☐ Individual (only for IE or electioneering comm.) (Type name) Jim Mi For Peacoch ☐ Chairperson (only for PC and PTY)						
x E Paler a	x E Pacoa					

(1) Name	CAMPAIGN TREASURER'S RE	PORT – ITEMIZED	EXPENDIT 2) I.D. Number	URES	4752
	d 10 / 12 / 34 through 10		4) Page	of _	
(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
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(1) Name 51m my Earl Regcoch (2) 1.D. Number 104764752								
(3) Cover Period	(3) Cover Period 10 / 12 / 24 through 10 / 25 / 24 (4) Page of							
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date (6)	Full Name (Last, Suffix, First, Middle)							
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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DS-DE 13 (Rev. 11/13)

	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Jinny Earl Beacoch	OFFICE USE ONLY
(2)	Name	
(-,	Address (number and street)	RECEIVE D
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number: 104764752
(4)	Check appropriate box(es):	and M tracks
	☐ Candidate Office Sought: ☐ Political Committee (PC)	DODOU II MONING OF
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded☐ ☐ Check here if PTY has disbanded
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if no other IE or EC reports will be filed
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Cove	(5) Report er Period: From $\frac{9}{1}$ / $\frac{38}{34}$ / $\frac{34}{34}$ To	Identifiers
□ o	original Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
Cash	h & Checks \$,,,	Monetary Expenditures \$,,565 . <u>\$0</u>
Loan	s \$,,	Transfers to Office Account \$
Total	I Monetary \$,,	
In-Ki	ind \$, .	Total Monetary \$, , 585 . 80
		(8) Other Distributions
_		\$
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$, _2, \ldots \dots \dots	\$
	(11) Cert It is a first degree misdemeanor for any perso	
l c	ertify that I have examined this report and it is true, corre	ect, and complete:
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) Jimmy Earl Leacold ☐ Candidate ☐ Chairperson (only for PC and PTY)
	L & fourth	v l & Paran
X Sig	gnature	X Signature

(1) Name Jin my Earl Peacok (2) I.D. Number 104764752									
(3) Cover Period	3) Cover Period 9 128 129 through 10 1 4 1 24 (4) Page of								
(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				
10/7/A4	17101 Porter Ave Moutverde H. 34756	Postege	CAN		414.00				
10/11/24	Montverde, F134756	Postage	Can		151.80				
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(1) Name <u>Jim my Earl Pea coch</u> (2) I.D. Number 104769752							
(3) Cover Period 9 128 124 through 10 1 4 124 (4) Page 1 of 1							
(5)	(7) Full Name		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor, Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1	NIA						
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DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Jim my Earl Pearach	OFFICE USE ONLY					
Name (2) 16549 Lowry Rd. Address (number and street) City, State, Zip Code	ted alan 2t grill					
☐ Check here if address has changed	(3) ID Number: 104764752					
(4) Check appropriate box(es): Candidate Office Sought: Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed individual making electioneering communications)						
	t Identifiers					
	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$,,	Monetary Expenditures \$,, 367.43					
Loans \$,	Transfers to Office Account \$, .					
Total Monetary \$, In-Kind \$,	Total Monetary \$,,					
	(8) Other Distributions \$,					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date \$,, 367. 43_					
	tification on to falsify a public record (ss. 839.13, F.S.)					
I certify that I have examined this report and it is true, corr	ect, and complete:					
(Type name) Jim Mx For Tocuscus ☐ Individual (only for IE ☐ Tkeasurer ☐ Deputy Treasurer or electioneering comm.)	(Type name) Try My Earl Poacoly ☑ Candidate ☐ Chairperson (only for PC and PTY)					
x Deals	x A E Peacolo					
Signature	Signature					
DS-DE 12 (Rev. 11/13)	SEE REVERSE FOR INSTRUCTIONS					

(1) Name <u>5</u>	in my Earl	te	sucody	(2) I.D. Number	1047	64752
(3) Cover Period	1 9 / 13 /24	throu	ugh <mark>q</mark> /	27,24	(4) Page		of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13)

(1) Name	CAMPAIGN TREASURER'S RE Jin my E. Legicou	PORT – ITEMIZED し() EXPENDIT 2) I.D. Number	URES	64752
(3) Cover Perio	0 10 10	•	4) Page	of _	
(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)	(11)
9/17/24	Delivery Signs Fuc. 40 W. Crystal Lolle St. Contonto, Ft. 32806		CAN		367.43
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CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) <u>J</u>	inmy Earl	Rea coch	OFFICE USE ONLY				
(2) Add	dress (number and street) Notice Flow Note Flow		9/12/24				
	Check here if address I	has changed	(3) ID Number: 104764752				
,	Δ.	(5) Report	t Identifiers				
Cover Pe			9 / <u>13 / 29</u> Report Type:				
☑ Origina	al Amendr	ment U Spe	ecial Election Report				
(6) Co	ntributions This Repo	ort	(7) Expenditures This Report				
Cash & C	Checks \$,		Monetary Expenditures \$,				
Loans	\$,	<u> </u>	Transfers to Office Account \$, , .				
Total Moi	netary \$, _		Total Monetary \$, ,				
In-Kind	\$,						
			(8) Other Distributions				
(9) TO	TAL Monetary Contrik	butions To Date	(10) TOTAL Monetary Expenditures To Date				
	It is a first degree mi		tification on to falsify a public record (ss. 839.13, F.S.)				
I certify	that I have examined this	is report and it is true, corre	ect, and complete:				
(Type na	dual (only for IE Treasur	Pequoth Treasurer	(Type name) Jimmy Earl Leauch Candidate				
X Signatu	1 Et	exerb_	X Signature Secret				

(1) Name Sin My Ewil Double (2) I.D. Number 104764752								
(3) Cover Perio		10 0.4	4) Page	of_				
(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)	(11) Amount			
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(1) Name	Jimmy Earl	Peanoch	(2) I.D. Number	10471	4752
(3) Cover Period 8 /31 /24 through 9 /13 /24 (4) Page 1 of 1						
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	Туре	Description	Amendment	Amount
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CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Jimmy Earl Peracock	OFFICE USE ONLY						
Name (2) 16549 Lowy Rd. Address (number and street) City, State, Zip Code	DECEIVED Smy						
Check here if address has changed	(3) ID Number: 104764752						
(4) Check appropriate box(es): Candidate Office Sought: 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 8 / 22 / 34 To 8 / 30 / 34 Report Type: 2024 9							
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, <u></u> , <u></u> _, <u></u> , <u></u>	Monetary Expenditures \$,,						
Loans \$	Transfers to Office Account \$,						
Total Monetary \$,,	Total Monetary \$, , <u>60</u> . <u>00</u>						
	(8) Other Distributions \$,						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(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) Jimmy For Voucocy ☐ Individual (only for IE or electioneering comm.)	(Type name) Timm Few Tework Candidate Chairperson (only for PC and PTY)						
x E Peacos	X Leaves						
DS-DE 12 (Rev. 11/13)	SEE REVERSE FOR INSTRUCTIONS						

(1) Name Jinny E. Heacoch (2) I.D. Number 10476							64752		
(1) Name <u>Jinny E. Heacoch</u> (2) I.D. Number <u>104764752</u> (3) Cover Period <u>8</u> 122 124 through <u>8</u> 130 134 (4) Page <u>1</u> of <u>1</u>									
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name Jinny Fort fecusion (2) I.D. Number 104764752									
	d & 122124 through 8 /	70	4) Page	, of _					
(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				
8 22/24	P.O. Box 560008 Moutvede, Fl. 34756	Coudidate registration	CAN		\$ 60.00				
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