

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) LEVON SIMMS

Name

(2) 3130 SAINT CHARLES STREET

Address (number and street)

FORT MYERS, FLORIDA 33916

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

15 FEB 6 2:11 PM

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMAN FOR WARD 3

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 01 /24 /2015 To 01 /30 /2015 Report Type: SP2

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 132 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 132 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 74 . 19

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

Total Monetary \$ _____ , _____ , 74 . 19

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 632 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 500 . 49

(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) WILLIE J JACKSON

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

X Willie Jackson
Signature

(Type name) LEVON SIMMS

Candidate Chairperson (only for PC and PTY)

X Levon Simms
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name LEVON SIMMS (2) I.D. Number _____

(3) Cover Period 01 / 24 / 2015 through 01 / 30 / 2015 (4) Page 1 of 1 15 FEB 6 2:12 P

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
01 / 26 / 2015	01	MINNIE JACKSON 2604 SAINT CHARLES ST FORT MYERS, FL 33916	I	RETIRED	CHE			100.00
01 / 27 / 2015	02	MARGARET G VINCENT 3230 COTTONWOOD BLVD FORT MYERS FL	I		CAS			12.00
01 / 27 / 2015	03	PATRICIA DUFFY 14685 CALUSA PALM DR FORT MYERS, FL 33919	I		CHE			20.00
/ /								
/ /								
/ /								
/ /								
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name LEVON SIMMS

(2) I.D. Number _____

(3) Cover Period 01 / 24 / 2015 through 01 / 30 / 2015

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(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					
01 / 27 / 2015	STAPLES 3236 FORUM BOULEVARD FORT MYERS, FLORIDA 33905	POST CARDS	CAN		74.19
01					
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