

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ken Marsh
 Name
 (2) 2011 Gail Ave
 Address (number and street)
Jacksonville Beach, FL 32250
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es): City Council Seat 3 At- Large

Candidate Office Sought: _____
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) 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

(5) Report Identifiers

Cover Period: From 4 / 1 / 2020 To 04 / 30 / 2020 Report Type: 2020M4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	500	00		
Loans	\$		00		
Total Monetary	\$		500		00
In-Kind	\$		00		

(7) Expenditures This Report

Monetary Expenditures	\$	24	80		
Transfers to Office Account	\$		00		
Total Monetary	\$		24		80

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 4, 100 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 1008 40

(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:

<p style="text-align: center;"><u>Darby Marsh</u> (Type name)</p> <p><input type="checkbox"/> Individual (only for IE or electioneering comm.) <input type="checkbox"/> Treasurer <input checked="" type="checkbox"/> Deputy Treasurer</p> <p><u>X</u> Signature</p>	<p style="text-align: center;"><u>Ken Marsh</u> (Type name)</p> <p><input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC and PTY)</p> <p><u>X</u> Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

Ken Marsh

(1) Name _____ (2) I.D. Number _____
 04 01 2020 04 30 2020 1 1
 (3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (4) Page ____ of ____

(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				
4 27 2020		John Murphy 8223 Chester Lake Rd N Jacksonville, FL 32256	I	Retired	CAS			500.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ken Marsh

(2) I.D. Number _____

(3) Cover Period 04 / 01 / 2020 through 04 / 30 / 2020

(4) Page 1 of 1

(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					
04 / 20 / 2020 1	Facebook 1 Hacker Way Menlo Park, CA 94025	Facebook Advertising	CAN		10.00
04 / 27 / 2020 2	Paypal 2211 North 1st ST San Jose, CA 95131	Transaction fee	CAN		14.80