

FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS

(1) JOHN A. JAMES RECEIVED ONE
Candidate, Committee or Party Name

(3) PO BOX 834 DELEON SPCS I.D. Number
Address (number and street) City State Zip Code

Check box if address has changed since last report

(4) Check appropriate box(es):

Candidate (office sought): VOLUSIA COUNTY COUNCIL DISTRICT 1

Political Committee Check if PC has DISBANDED

Committee of Continuous Existence Check if CCE has DISBANDED

Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 09/09/00 To 09/28/00 Report Type S3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 100.00

Loans \$ _____

Total Monetary \$ _____

In-kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 73.14

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions to Date
\$ 594.00

(10) TOTAL Monetary Expenditures to Date
\$ 495.06

(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

JOHN A. JAMES

Name of Treasurer Deputy Treasurer

[Signature]
Signature

I certify that I have examined this report and it is true, correct and complete

JOHN A. JAMES

Name of Candidate Chairman (PC/PTY Only)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JOHN A JAMES

(2) I.D. Number NONE

(3) Cover Period 09 / 09 / 00 through 09 / 28 / 00

(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		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
09/09/00	00001	JOHN A. JAMES PO Box 1971 DELEON SPGS, FL 32130	I	RETIRED	CHE			\$100.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JOHN A. JAMES

(2) I.D. Number NONE

(3) Cover Period 09/09/00 through 09/28/00

(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
09/09/00 00001	QUALITY QUICKPRINT 1441 N. AMELIA AVE DELAND, FL 32724	BROCHURES	MON,		\$73.14
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