CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Name (2) Address (number and street)	SEP 1 2 2024					
City, State, Zip Code	Бу					
Check here if address has changed	(3) ID Number:					
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 / 24 / 211 To	9 / 6 / 24 Report Type: 62					
Original Amendment Spe	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$, ,	Monetary Expenditures \$,, <u>uaa 43</u>					
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					
\$	\$					
(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	ect, and complete:					
(Type name)	(Type name) Ohng Colson Candidate Chairperson (only for PC and PTY)					
X Mono Signature	Signature Col					

(1) Name hnny Colson (2) I.D. Number By (3) Cover Period 8 / 24 / 24 through 9 / 6 / 24 (4) Page 1 of 1

		,					
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_					
Sequence	Street Address &		Contributor	Contribution	In-kind	A	
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
b 0	Johnny Coson Heritage way Stuartific 34896		Ret L.E	1030			444,64
14 18	Heritageway	エ	NC.	Coort			'
2 21 24	31096		6.6	cas			
8-31-24	JAKIE						
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

DEGEOVE SEP 1 2 2024

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name	ohnny	Colson			(2) I.D. Number				
(3) Cover Perio	nd 8/2	24/ 2 4 through	916	124	(4) Page		of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
8/31/20	519ns on the Cheap 11525 Stonehollow Dr B 220 Austin Texas 78758	(0) 2.(3)	CAN	GZ	444.64
8/3//24	Johnny Colson itteritage wy Stuartifi 34992	for Loan	_	GZ	444.64
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