

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Harold McCart

Name

(2) https://votemccart.com; 4495-304 Roosevelt Blvd. Suite 277

Address (number and street)

Jacksonville, FL 32210

City, State, Zip Code

Check here if address has changed

(3) ID Number: 845

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**

[1185376]

Submitted on:  
3/5/2019 10:31:18 (eastern)

(4) Check appropriate box(es):

Candidate Office Sought: City Council At Large Group 4

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 1 / 26 / 2019 To 2 / 8 / 2019 Report Type: F3

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 100 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 100 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 36 , 145 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 28 , 449 . 33

### (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)

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

X

Signature

(Type name)

Candidate  Chairperson (only for PC and PTY)

X

Signature

### CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Harold McCart (2) I.D. Number 845

1/26/2019 through 2/8/2019

(3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
2/5/2019 / /	Scott Waterproofing, Inc., Post Office Box 1748 Orange Park, FL 32067	B	waterproof ing	CH		Add	\$100.00
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Harold McCart

(2) I.D. Number 845

(3) Cover Period 1/26/2019 through 2/8/2019

(4) Page 1 of 0

(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					
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