	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Thad Altman	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	1225 N A1A Hwy	Submitted on:						
	Address (number and street)	7/1/2023 20:26:03 (eastern)						
	Indialantic, FL 32903							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 954						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: County Commis	sioner, District 5						
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded						
		☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	t Identifiers						
Cov	., .							
	er Period: From $\frac{6}{2}$ / $\frac{1}{2023}$ To							
<u>N</u> ∪	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
	-	Monetary						
Casl	h & Checks \$, , 0 . <u>00</u>	Expenditures \$, 4 , 365 . 00						
¥	e 0.00	<u></u>						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Tato	\$ 0.00	Office Account \$, , , 0 . 00						
10เล	al Monetary \$, , 0 . 00	Total Monetary \$. 4 365 . 00						
! IZ	• • • •	Total Monetary \$,4 , 365 . 00						
In-Ki	ind \$,, <u>0</u> .00	(a) Other Distributions						
		(8) Other Distributions \$, , 0.00						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$						
	(11) Cert It is a first degree misdemeanor for any pers	tification on to falsify a public record (ss. 839.13, F.S.)						
La	-							
I certify that I have examined this report and it is true, correct, and complete:								
_(T	ype name)	(Type name)						
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		X						
Si	ignature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Thad Altman				2) I.D. Numbe	er <u>9</u>	54
(3) Cover Perio	6/1/2023 od///	thro	ough	/30/2023	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9) Contribution	(10)	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
j j							
J I							
1 1							
1 1							
J I							

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	had	Altman	L					 (2) I.D. Nun	nber	9	954	
		6/1/	202	23		6/30/2	023					
(3) Cover Pe	riod	1		1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
6/29/2023	Shops on Fifth Avenue, LLC,	campaign hq	MO		\$4,365.00
1	200 2nd Ave, Unit 804 St. Petersburg, FL 33701				
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