CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Nicholas Ryan Hatcher (Data)	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	PO Box 2643	Submitted on:								
	Address (number and street)	2/1/2021 13:48:50 (eastern)								
	Cross City, FL 32628									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:187								
(4)	Check appropriate box(es):									
	Candidate Office Sought: Sheriff									
	Political Committee (PC)	Check have if BC as ECO has dishauded								
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ 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 Identifiers										
Cove		9 / 18 / 2020 Report Type: G3								
		pecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(0)	Contributions This Report									
Cash	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , -259.32								
Odoi	7 d Shooks	,, <u></u> ,,								
Loar	ns \$, , 0.00	Transfers to								
		Office Account \$, 0 . 00								
Tota	I Monetary \$, , 0 . 00									
		Total Monetary \$,,259. 32								
In-Ki	nd \$, , 0 . <u>00</u>									
		(8) Other Distributions								
		\$,, <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>35</u> , <u>570</u> . <u>00</u>	\$,32 , _17451								
(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:										
(T)	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Nicholas Ryan Hatch	er (D	ata)		2) I.D. Numbe	er <u>1</u>	.87
	9/5/2020		9	/18/2020		1	0
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)		(9)	(10)	(11)	(12)
Sequence Number	City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
	Oity, State, 21p Sout	Турс	Cocapation	Турс	Везоприон		7 (HOGHE
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1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Nichola	s Ryar	n Hatch	ner (Data)			 (2) I.D. Nun	nber	1	L87	
	9	75/20	20		9/18/2	020		-			
(3) Cover P	eriod	I	1	through	1	1	(4) Page	1	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
9/8/2020	Wildcats Football, 58 ne 95 st Cross City, fl 32628	donation	MO	Delete	\$100.00
9/11/2020	Subway, 16318 sw hwy 19 Cross City, FL 32628	middle school football lunch	МО	Delete	\$159.32
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