

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Charlotte M. Gardner
Name
 (2) 5275 Woodgate Way
Address (number and street)
Marianna, FL 32446
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1019458]
 Submitted on:
 7/29/2010 22:07:57 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 123

(4) **Check appropriate box(es):**
 Candidate (office sought): School Board Member District 5
 Political Committee **CHECK IF PC HAS DISBANDED**
 Committee of Continuous Existence **CHECK IF CCE HAS DISBANDED**
 Party Executive Committee **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**
 Electioneering Communication

(5) REPORT IDENTIFIERS
 Cover Period: From 7/17/2010 To 7/30/2010 / Report Type F2
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>500.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>500.00</u>
In-Kind	\$	<u>372.77</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 2,000.00

(10) TOTAL Monetary Expenditures To Date
 \$ 883.63

(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) _____ <input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer X _____ Signature	I certify that I have examined this report and it is true, correct, and complete. (Type name) _____ <input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization) X _____ Signature
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Charlotte M. Gardner (2) I.D. Number 123
 7/17/2010 through 7/30/2010
 (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 Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
7/24/2010 / /	Morgan, Jacinta A 4384 Angela Drive Marianna, FL 32446	I	retired educator	CH			\$500.00
1							
7/21/2010 / /	Gardner, Charlotte M 5275 Woodgate Way Marianna, FL 32446	I	candidate	IK	envelopes		\$15.00
2							
7/22/2010 / /	Gardner, William C 5275 Woodgate Way Marianna, FL 32446	I	retired, husband of cand	IK	gasoline, used in door to door canvasing		\$271.34
3							
7/22/2010 / /	Corless, Polly 22483 Pinehurst Lane Fleming Island, FL 32003	I	human resource manager	IK	gasoline, used in door to door canvasing		\$26.43
4							
7/22/2010 / /	Williams, Joyce 4257 Schwenke Drive Marianna, FL 32446	I	aide	IK	gasoline used in door to door canvasing		\$20.00
5							
7/22/2010 / /	Carson, Janet 5967 Highway 90 Marianna, FL 32446	I	teacher	IK	gasoline, used in door to door canvasing		\$20.00
6							
7/22/2010 / /	Sims, Neal 2961 Hunter Fish Camp Road Marianna, FL 32446	I	retired	IK	gasoline, used in door to door canvasing		\$20.00
7							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Charlotte M. Gardner

(2) I.D. Number 123

(3) Cover Period 7/17/2010 through 7/30/2010

(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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