

**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**  
[1025423]  
Submitted on:  
10/30/2010 16:19:23 (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  
 Electioneering Communication  CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 8/20/2010 To 11/21/2010 Report Type TAP  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00  
 Loans \$ 0.00  
 Total Monetary \$ 0.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 687.37  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 687.37

**(8) Other Distributions**  
 \$ 0.00

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

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 2,000.00

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

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

(1) Name Charlotte M. Gardner (2) I.D. Number 123

8/20/2010 through 11/21/2010

(3) Cover Period      /      /      through      /      /      (4) Page 1 of 0

(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
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Charlotte M. Gardner

(2) I.D. Number 123

(3) Cover Period 8/20/2010 through 11/21/2010

(4) Page 1 of 1

(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
8/21/2010 / /	U. S. Postal Service, Lafayette Street Marianna, FL 32447	postage	MO		\$264.00
1					
8/30/2010 / /	Jackson County Times, 2866 Madison St Marianna, FL 32446	thank you newspaper ad	MO		\$94.50
2					
8/30/2010 / /	Jackson County Floridan, Constitution Lane Marianna, FL 32447	thank you newspaper ad	MO		\$223.00
3					
10/5/2010 / /	Gardner, Charlotte M. 5275 Woodgate Way Marianna, FL 32446	close out campaign account	MO		\$105.87
4					
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