CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Curtis Richardson	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	533 Tuskegee Street	Submitted on:							
	Address (number and street)	1/31/2021 17:40:55 (eastern)							
	Tallahassee, FL 32305  City, State, Zip Code	<del></del>							
	Check here if address has changed	(3) ID Number: 584							
(4)	_	(6) 12 (41)							
(-)	Check appropriate box(es):								
	(5) Report	dentifiers							
	er Period: From 9 / 19 / 2020 To								
		T							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , , 000	Monetary							
Loar	s , , ,	Transfers to Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 0 . 00	Total Monetary \$,1 , 305 . 10							
In-Ki	ind \$,,,000								
		(8) Other Distributions \$ , , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T	(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								
X		X							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Curtis Richardson				2) I.D. Numbe	er <u>5</u>	84
	9/19/2020		1	0/2/2020		1	0
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e <u> </u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
Number	City, State, Zip Code	Турс	Occupation	Туре	Description	33110110111	Amount
1 1							
J I							
1 1							
1 1							
J J							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name _	Curtis	Richar	dson				 (2) I.D. Nur	nber	5	584	
		9/19/2	020		10/2/20	20					
(3) Cover P	eriod	T	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
9/21/2020	, U.S.P.S. 2500 South Adams Street Tallahassee, FL 32314	postage	МО	Delete	\$13,154.89
1					
9/21/2020	, U.S.P.S. 2500 South Adams Street Tallahassee, FL 32314	postage	МО	Add	\$11,849.79
2					
_/_/					
//					
11					
//					
//					
DS-DE 14 (Rev.	Turn V				