	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Curtis Richardson	OFFICE USE ONLY					
Ta	Name	ONLINE SUBMISSION					
(2)	533 Tuskegee Street	Submitted on:					
	Address (number and street)	4/16/2020 11:31:58 (eastern)					
	Tallahassee, 32305 City, State, Zip Code	 ' '					
	☐ Check here if address has changed	(3) ID Number: 584					
(4)	_	(3) ID NUMBER.					
(4)	Check appropriate box(es): X Candidate Office Sought: Tallahassee Candidate	tity Commission - Seat 2					
	Political Committee (PC)	Ity Commission Beac 2					
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
		Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if no other IE or EC reports will be filed					
	• • • •	dentifiers					
	rer Period: From 3 / 1 / 2020 To	3 / 31 / 2020 Report Type: 20M3					
<u> </u>	Original ☑ Amendment ☐ Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Cash	h & Checks \$, , 0 . <u>00</u>	Expenditures \$, , 0 . 00					
Loar	ns \$, , 0.00	Transfers to					
Luai	15 , , , , , , , , , , , , , , , , , , ,	Office Account \$, , 0 . 00					
Tota	al Monetary \$, , 0 . 00	· · · · · · _ · _ ·					
		Total Monetary \$, , 0 . 00					
In-Ki	ind \$,,, _000						
		(8) Other Distributions					
	1	\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, 45_, 070 . 00	\$, 4, 421. 44					
	(11) Cert It is a first degree misdemeanor for any perso						
اء	-						
10	I certify that I have examined this report and it is true, correct, and complete:						
-	Type name)	(Type name)					
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		X					
	ignature	Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Curtis Richardson				er .	584	
	3/1/2020 riod / /	3.		/31/2020			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	-	(8) ntributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
3/1/2020 /	Household Account, Finley Cook 1255 Commerce Blvd Midway, FL 32343-6628	ВС	ontractor	СН		Delete	\$250.0
3/1/2020	Cook Household Account, Finley 1255 Commerce Blvd Midway, FL 32343-6628	I c	contractor	СН		Add	\$250.0
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J I							
1 1							
f f							
f I							

) Name <u>Curtis</u>	AMPAIGN TREASURER'S RI Richardson 3/1/2020 3/3	(3	584		
) Cover Period _	3/1/2020 3/3 / through		4) Page1	of	0
(5) Date (6) Sequence Number	(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)	(11) Amount
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