

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Marie Goodman  
 Name  
 (2) 18099 NW County Road 379A  
 Address (number and street)  
Bristol, FL 32321  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1114429]  
 Submitted on:  
 7/26/2016 20:46:55 (eastern)

Check here if address has changed (3) ID Number: 114

(4) Check appropriate box(es):  
 Candidate Office Sought: Tax Collector  
 Political Committee (PC)  
 Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded  
 Party Executive Committee (PTY)  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

### (5) Report Identifiers

Cover Period: From 7 / 9 / 2016 To 7 / 22 / 2016 Report Type: P3  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 0 . 00  
 Loans \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 0 . 00  
 In-Kind \$        ,        , 100 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 14 . 58  
 Transfers to Office Account \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 14 . 58

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        ,        , 190 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,        , 46 . 93

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Marie Goodman (2) I.D. Number 114  
 (3) Cover Period 7/9/2016 through 7/22/2016 (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
7/22/2016 / /	Goodman, Chris 18099 NW CR 379A Bristol, FL 32321	I	program manager	IK	stamps and envelopes		\$100.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Marie Goodman

(2) I.D. Number 114

(3) Cover Period 7/9/2016 through 7/22/2016

(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
(6) Sequence Number					
7/22/2016 //	S O E, Hwy 20 Bristol, FL 32321	labels	MO		\$14.58
1					
//					
//					
//					
//					
//					
//					
//					