FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Mark J. Glassman	OFFICE USE ONLY 57						
Name (2) 29534 Fog Hollow Dr, Wesley Chapel, FL 3	2542						
(2) 29534 Fog Hollow Dr, Wesley Chapel, FL 3 Address (number and street)	33343						
Address (Humber and street)							
City, State, Zip Code							
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es): X Candidate (office sought): CDD Meadow Poi	nte II, Seat 2						
☐ Political Committee	CHECK IF PC HAS DISBANDED						
Committee of Continuous Existence	CHECK IF CCE HAS DISBANDED						
☐ Party Executive Committee	7						
☐ Electioneering Communication	CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED						
(5) REPORT	IDENTIFIERS						
Cover Period: From	2/5/2007 / Report Type TR-G						
☑ Original ☐ Amendment ☐ Special Election	Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$0.00	Monetary Expenditures \$ 2.20						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total						
In-Kind \$	Monetary \$ 2.20						
	(8) Other Distributions \$0.00						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$	\$						
(11) CEPT	IFICATION						
(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. I certify that I have examined this report and it is true, correct, and complete.							
(Type name)	(Type name)						
Individual (only for Treasurer Deputy Treasurer	Candidate Chairperson (only for PC, PTY &						
electioneering commun.)	electioneering commun. organization)						
Signature	Signature						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Mark J. Glassman				z) I.D. Numbe	5	7
	11/3/2006		2	/5/2007			
(3) Cover Perio	od///	thro			(4) Pag	e 1	of ⁰
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(E)	(7)		(0)	(0)	(40)	(4.4)	(40)
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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DS-DE 13 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) NameMa	ark J.	Glass	man				 (2) I.D. Num	nber	5	57	- Pr
	1	1/3/2	006		2/5/200	7					
(3) Cover Per	riod	1	1	through	1	1	 (4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
1/26/2007	glassman, mark j 29534 fog hollow dr wesley chapel, fl 33543	repay loan	МО		\$2.20
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