CAMPAIGN TREASURE	ER'S REPORT SUMMARY
(1) Anthony E. Coleman SR.	OFFICE USE ONLY
Name	ONLINE SUBMISSION
(2) Protected	Submitted on:
Address (number and street)	4/10/2024 01:50:27 (eastern)
City, State, Zip Code	
	(2) ID Nih
Check here if address has changed	(3) ID Number:1328
(4) Check appropriate box(es):	-1.4.0
<ul><li>☑ Candidate Office Sought: School Board</li><li>☑ Political Committee (PC)</li></ul>	- Dist 2
☐ 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) Repor	rt Identifiers
Cover Period: From $1 / 1 / 2024$ To	3 / 31 / 2024 Report Type: <u>Q1</u>
☑ Original ☐ Amendment ☐ Sp	pecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
	Monetary
Cash & Checks \$ , 2 , 850 . 00	Expenditures \$ , , 30 . 00
\$ 0.00	To section to
Loans \$,,,000	Transfers to Office Account \$
Total Monetary \$ , 2 , 850 . 00	Office Account \$ , , , 0 . 00
Total Monetary *	Total Monetary \$ , , 30 . 00
In-Kind \$ , , 0.00	,,
	(8) Other Distributions
	\$ , , 000_
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$	\$
(11) Ce	rtification
, , , , , , , , , , , , , , , , , , ,	son to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, cor	rrect, and complete:
(Type name)	(Type name)
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)
or electioneering comm.)	
X	×
Signature	Signature

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

(1) Name	nthony E. C	oleman	SR.		(2	) I.D. Number _		1328	
	1/1/2024	4		3/31/	2024				
(3) Cover Period	<i>T</i>	1	through	1	1	(A) Page	1	$_{of}$ 1	

		7	-			1	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
2/9/2024	Coleman, Anthony Protected Hastings, FL 32145	I	retired	СН			\$200.00
1							
3/4/2024	Upchurch III, Frank D 4148 Creekbluff Dr St Augustine, FL 32086	I	attorney	СН			\$250.00
2							
3/6/2024	Burke Lial, 3652 Crazy Horse St Augustine, FL 32086	В	business	СН			\$500.00
3							
3/6/2024	Barnes, Dale PO Drawer 1026 Hastings, FL 32145	В	owner	СН			\$300.00
4							
3/12/2024 / /	Barley, Mark 200 Plantation Deland Dr St Augustine, FL 32080	I	personal	СН			\$350.00
<b>5</b>			-				<b></b>
3/15/2024	Bulls-Hit Ranch & Farm Inc, 9165 Old Hastings Rd Hastings, FL 32145	В	farmer	СН			\$500.0
6							
3/15/2024 / /	Mobley, Joseph 1301 River Place Rd Jacksonville, FL 32207	В	business	СН			\$250.0
7							
3/24/2024	Owens, Williams Protected St Augustine, FL 32086	I	retired	СН			\$500.0
0							

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

(1) Name _	Anthony	Ε.	Coler	man	SR.		10000000	 (2)	I.D. Num	ber_		1328	300
	1	/1/	/2024			3/31,	/2024	·· ·· ·· ··					
(3) Cover P	eriod	1		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
1/31/2024	Capital City Bank, PO Box 900 Tallahassee, FL 32302	service charge	МО		\$10.00
1					
2/29/2024	Capital City Bank, PO Box 900 Tallahassee, FL 32302	service charge	МО		\$10.00
2					
3/29/2024	Capital City Bank, PO Box 900 Tallahassee, FL 32302	service charge	МО		\$10.00
3					
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DS-DE 14 (Rev					