	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Charles (Randy) Hartman	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	PO Box 1324	Submitted on:								
	Address (number and street)	4/1/2020 11:33:28 (eastern)								
	New Smyrna Beach, FL 32170									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:646								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: New Smyrna Beach Commission Zone 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From 3 / 1 / 2020 To	3 / 31 / 2020 Report Type: <u>M3</u>								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ , , <u>500</u> . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$ , , <u>500</u> . <u>00</u>	Total Monetary \$ , , , 78 . 28								
In-Ki	ind \$									
		(8) Other Distributions \$ , , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$,,									
(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   Treasurer   Deputy Treasurer or electioneering comm.)    Candidate   Chairperson (only for PC and PTY)									
X		X Simulation								
Si	gnature	Signature								

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

(1) Name <u>Cha</u>	rles (Ran	dy) Ha	rtman	(2) I.D. Number							
	3/1/202	0		3/31/	2020						
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1		

	žI.		)				
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
3/6/2020	Hartman, Charles Randy ***Protected Voter***		city commissior er	CH 1	***		\$500.0
1							
3/10/2020	Herbert, Sharon 431 Sweet Bay Ave. New Smyrna Beach, US 32168	I		IK	checks for the campaign account		\$14.7
2							
3/5/2020	Hartman, Charles Randy ***Protected Voter***	I		IK	campaign post office box fee		\$59.0
3							
1 1	_						
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1 1	-						
1 1							
1 1							

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

(1) Name _	Charles	(Randy	r) Ha	artman			 (2) I.D. Nun	nber	6	546	300
	3	/1/202	0		3/31/	2020					
(3) Cover F	eriod	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
3/13/2020	Lithocraft Printing, 4460 Ridgewood Ave. Pt. Orange, FL 32127	business cards	MO		\$78.28
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