	CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Charles (Randy) Hartman	OFFICE USE ONLY									
	Name	ONLINE SUBMISSION [1212990]									
(2)	PO Box 1324	Submitted on:									
	Address (number and street) New Smyrna Beach, FL 32170	6/25/2020 15:52:18 (eastern)									
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number: 646									
(4)	Check appropriate box(es):										
	 ☐ Candidate Office Sought: New Smyrna Beach Commission Zone 4 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 										
(5) Report Identifiers											
Cove	er Period: From $\underline{6}$ / $\underline{1}$ / $\underline{2020}$ To	6 / 12 / 2020 Report Type: P1									
□ 0	riginal X Amendment Spe	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Cash	n & Checks \$, , ,000	Monetary									
Loar		Transfers to Office Account \$, , , 0 . 00									
Total Monetary \$		Total Monetary \$, , <u>169</u> . <u>65</u>									
In-Ki	nd \$, , , 0 . 00	(0) Other Distributions									
		(8) Other Distributions \$, , 000									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$, <u>1</u> , <u>995</u> . <u>20</u>	\$, , <u>261</u> . <u>46</u>									
	(11) Cert It is a first degree misdemeanor for any pers ertify that I have examined this report and it is true, corr ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	on to falsify a public record (ss. 839.13, F.S.)									
X		X									
-	gnature	Signature									

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Charles (Randy) Har	tman			2) I.D. Numbe	er <u>6</u>	46
	6/1/2020		6	/12/2020		-	0
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Co	(8) pontributor	(9) Contribution	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
J J							
J I							
I I							
J I							
J I							
J I							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Charles	(Randy	7) H	artman			 (2) I.D. Nun	nber	6	546	300
	6	/1/202	0		6/12/2	020					
(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
6/11/2020	City of New Smyrna Beach,	filing fee	MO	Add	\$169.65
1	210 Sams Ave. New Smyrna Beach, FL 32168				
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				T.	
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DS-DE 14 (Rev.					