

AMENDMENT

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Homer L. Hartage
Name

(2) 1221 W. Colonial Dr., Suite 203
Address (number and street)

Orlando, FL 32804
City, State, Zip Code

OFFICE USE ONLY

BILL BOYLE
COUNTY CLERK
2013 DEC 12 P 2:18

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Orange County Commission District 6
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 11 / 01 / 2013 To 11 / 30 / 2013 Report Type M11

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

| | | |
|----------------|----|--------|
| Cash & Checks | \$ | 197.93 |
| Loans | \$ | 0.00 |
| Total Monetary | \$ | 197.93 |
| In-Kind | \$ | 0.00 |

(7) EXPENDITURES THIS REPORT

| | | |
|-----------------------------|----|--------|
| Monetary Expenditures | \$ | 287.03 |
| Transfers to Office Account | \$ | 0.00 |
| Total Monetary | \$ | 287.03 |

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 197.93

(10) TOTAL Monetary Expenditures To Date

\$ 287.03

(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) Maria A. Hobb


Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X 
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Homer L. Hartage

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X 
Signature