

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Karl Artner
 Name
 (2) 6631 NW 22 CT
 Address (number and street)
Margate, FL 33063
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Margate City Commissioner, Seat #1
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 08 / 01 / 2020 To 08 / 31 / 2020 Report Type: 2020 M08

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 10 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 675 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 327 . 43

(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) Karl Artner

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

Signature

(Type name) Karl Artner

Candidate Chairperson (only for PC and PTY)

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

MARGATE

(1) Name Karl Artner

(2) I.D. Number _____

(3) Cover Period 08 / 01 / 2020 through 08 / 31 / 2020

(4) Page 1 of 1

SEP 10 2020

QUALIFYING OFFICES

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

MARGATE

(1) Name Karl Artner

(2) I.D. Number _____

(3) Cover Period 08 / 01 / 2020 through 08 / 31 / 2020

(4) Page 1 of 10 SEP 10 2020

QUALIFYING OFFICES

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
08 / 31 / 2020	WELLS FARGO	Bank Fees	MON		\$ 10.00
01					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					