	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Ashley Hartfield-Viewins	OFFICE USE ONLY
•	Name	ONLINE SUBMISSION
(2)	4618 Lithia Springs Rd.	Submitted on:
	Address (number and street)	Submitted on: 1/17/2024 12:56:49 (eastern)
	Lithia, FL 33547	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number:2381
(4)	Check appropriate box(es):	
	☐ Candidate Office Sought: School Board I	Member, Dist. 7
	Political Committee (PC)	□ 01 - d. beer 1/ 20 F00 beer disheaded
		<ul><li>☐ Check here if PC or ECO has disbanded</li><li>☐ Check here if PTY has disbanded</li></ul>
		☐ Check here if no other IE or EC reports will be filed
	individual making electioneering communications)	-
	(5) Para et	11 40
_	.,,	dentifiers
Cove	er Period: From $10$ / $1$ / $2023$ To	12 / 31 / 2023 Report Type: Q4
X O	Original Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
		Monetary
Cash	h & Checks \$ , , <u>375</u> . <u>00</u>	Expenditures \$ , , 0 . 00
	\$ 0.00	T
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$
T-+0	\$ 375 00	Office Account \$ , , , 0 . 00
lota	Il Monetary \$ , , <u>375</u> . <u>00</u>	Total Monetary \$ . 0 . 00
· 12:	· · • • 0 00	Total Monetary \$ , , , 0 . 00
In-Ki	ind \$,,000	
		(8) Other Distributions
_		\$,, <u>0</u> . <u>00</u>
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$,, <u>475</u> 00	\$, ,, 0 . 00_
	(11) Cert	
	It is a first degree misdemeanor for any person	on to falsify a public record (ss. 839.13, F.S.)
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:
(T <sup>,</sup>	ype name)	(Type name)
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)
or	electioneering comm.)	
х		×
	gnature	Signature

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

(1) Name	shlev Hartf	ield-V	iewins		(2)		2381		
	10/1/20	23		12/31	L/2023				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of $\frac{1}{}$	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10/10/2023	Houston , Kimberly 10300 49th Street, N, Suite clearwater, fl 33762	Ī		CH FL 33762			\$25.0
1							
10/9/2023	Celerin, Donovan 189 schermerhorn st 2h brooklyn, ny 11201	I		СН			\$100.0
2							
10/9/2023	huff, lauren 3730 midtown dr tampa, fl 33607		family therapist	СН			\$150.0
3							
10/9/2023	goodson, wendell 3818 dahlia ave tampa, fl 33619	I		СН			\$25.0
4							
10/9/2023	mcclendon, lisa ***Protected Voter***	I		СН			\$25.0
10/9/2023	goodson-celerin, wendi 2922 valencia ridge st valrico, fl 33596	I		СН			\$50.0
6							
f I							
1 1							
DS-DE 13 (Rev. 11					S AND CODE VAL		

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

(1) Name _A				iewins		2) I.D. Nun		2381				
(3) Cover Pe		10/1/20	)23	through_	12/31	/2023 /	_ (4	l) Page	1	of	0	
(5)	Ĩ		C	7)	Ĭ	(8)		(9)	1	(10)	(11)	

(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
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