

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHHAMMER
Name

(2) 10041 W SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: COUNCILMEMBER, 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 10/30/20 To 11/30/20 Report Type: TR

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ . 0

Loans \$ _____ . 0

Total Monetary \$ _____ . 0

In-Kind \$ _____ . 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 747.73

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 747.73

(8) Other Distributions

\$ _____ , _____ , _____ . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , 25,700.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 25,700.00

(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) ANNA HOCHHAMMER

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

X 
Signature

(Type name) ANNA HOCHHAMMER

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ARNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 10, 30, 20 through 11, 3, 20 (4) Page 1 of 1

(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
11/30/20 /	ARNA HOCHKAMMER 10041 W SUBURBAN DR PINECREST FL 33456	RMB	MEDIA ADS		747.73
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) ANNA HOCHKAMMER
Name

(2) 10041 W SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER, 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 10 / 30 / 20 To 11 / 30 / 20 Report Type: TR

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . 0

Total Monetary \$ _____ , _____ , _____ . 0

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 247.73

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 247.73

(8) Other Distributions

\$ _____ , _____ , _____ . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , 25,700.00 , _____

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 25,700.00 , _____

(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) ANNA HOCHKAMMER

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

X [Signature]
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 10/30/20 through 11/3/20 (4) Page 1 of 1

(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					
11/30/20	ANNA HOCHKAMMER 10041 W SUBURBAN DR PINECREST FL 33456	RMB	MEDIA ADS		747.73
/					
//					
//					
//					
//					
//					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
 Name
 (2) 10041 W SUBURBAN DR
 Address (number and street)
PINECREST FL 33156
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

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

(5) Report Identifiers

Cover Period: From 10 / 17 / 20 To 10 / 29 / 20 Report Type: 63

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 5,000.00

Loans \$ 0.00

Total Monetary \$ 5,000.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 17,661.72

Transfers to Office Account \$ _____

Total Monetary \$ 17,661.72

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 25,700.00

(10) TOTAL Monetary Expenditures To Date

\$ 24,952.27

(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) ANNA HOCHKAMMER

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

X 
 Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 10 / 17 / 20 through 10 / 29 / 20 (4) Page 1 of 1

(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
(6) Sequence Number		Type	Occupation	Type	Description		Amount
10, 19, 20 1	BERGOW RADELL FERNANDEZ + LARKIN 800 SOUTH DISCAYNE BLVD. SUITE 850 MIAMI FL 33131	B	LAW FIRM.	CAS			500. ⁰⁰
10, 19, 20 2	THE CORRADINO GROUP FIRST TRUST CENTER SUITE 300 200 N 5th ST LOUISVILLE KY 40202	B	ENGIN- EERING	CAS			1000. ⁰⁰
10, 19, 20 3	CORRADINO LLC 202 S. MICHIGAN ST. SUITE 320 INDIANAPOLIS IN 46225	B	ENGIN- EERING	CAS			1000. ⁰⁰
10, 19, 20 4	JOSEPH + AMALIA CORRADINO 6485 SW 132 ST PINECREST FL 33156	I	ENGIN- EER/ PLANNER	CAS			1000. ⁰⁰
10, 19, 20 5	BECKER + POLAKOFF 1 EAST BROWARD BLVD. SUITE 1800 FT LAUDERDALE FL 33301	B	LAW FIRM	CAS			1000. ⁰⁰
10, 21, 20 6	MICHAEL TEIN 11045 SW 69 AVE PINECREST FL 33156	I	ATTORNEY	CAS			500. ⁰⁰
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER

(2) I.D. Number _____

(3) Cover Period 10/17/20 through 10/29/20

(4) Page 1 of 1

(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
10/19/20	MDW COMMUNICATIONS 2201 WASHINGTON AVE NW #200 WASHINGTON DC 20007	COMMUNICATIONS	CAN		17661.72
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 W SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER, 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 10, 3, 20 To 10, 16, 20 Report Type: 62

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,125.00

Loans \$ 2,000.00

Total Monetary \$ 3,125.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 45.90

Transfers to Office Account \$ 0.00

Total Monetary \$ 45.90

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 20,700.00

(10) TOTAL Monetary Expenditures To Date

\$ 1,290.55

(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) ANNA HOCHKAMMER

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

[Signature]
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HECH KAMMER (2) I.D. Number _____

(3) Cover Period 10, 3, 20 through 10, 16, 20 (4) Page 1 of 1

(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
(6) Sequence Number							
10, 5, 20 1	PAUL SASSO 12384 SW 82 AVE PINECREST FL 33156.	I	ATTORNEY	CAS			1000. ⁰⁰
10, 5, 20 2	VRENY ARNOLD 6709 SW 88ST #202 PINECREST FL 33156	I	RETIRED	CAS			25. ⁰⁰
10, 12, 20 3	KETHA DONNER 7821 SW 55 AVE MIAMI FL 33143	I	CONSULT- ANT	CAS			100. ⁰⁰
10, 8, 20 4	ANNA HECH KAMMER 10041 W SUBURBAN DR PINECREST FL	I	HOMEMAKER	LOA			2000. ⁰⁰
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 10, 3, 20 through 10, 16, 20 (4) Page 1 of 1

(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
10/16/20 1	ANEDOT 5555 HILTON AVE SUITE 106 BATON ROUGE LA 70808	FEES	CAN FEES		45.90
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 W SUBURBAN DRIVE
Address (number and street)
PINECREST FL 33156.

City, State, Zip Code

Check here if address has changed

(4) Check appropriate box(es):

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

(3) ID Number: _____

OFFICE USE ONLY
Village of Pinecrest
Office of the Village Clerk

OCT 07 2020

Guido H. Inguanzo, Jr.
Village Clerk

(5) Report Identifiers

Cover Period: From 9 / 19 / 20 To 10 / 2 / 20 Report Type: 61

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,425.00

Loans \$ _____

Total Monetary \$ 1,425.00

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 483.00

Transfers to Office Account \$ _____

Total Monetary \$ 483.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 11,515.00

(10) TOTAL Monetary Expenditures To Date

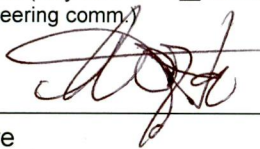
\$ 7,244.65

(11) Certification

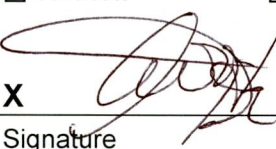
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) ANNA HOCHKAMMER
 Individual (only for IE or electioneering comm) Treasurer Deputy Treasurer


Signature

(Type name) ANNA HOCHKAMMER
 Candidate Chairperson (only for PC and PTY)


Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER

(2) I.D. Number _____

(3) Cover Period 9/1/20 through 9/30/20

(4) Page 1 of 1

(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
9/29/20 1	ANNA HOCHKAMMER 10041 W SUBURBAN DR PINEHURST FL 33156	COMMUNICATIONS SOCIAL MEDIA	RMB		400. ⁰⁰
9/30/20 2	ANEDOT 5555 MILTON AVE SUITE 106 BATON ROUGE LA 70808	FEES.	CAN		83. ⁰⁰
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HEATHKAMMER (2) I.D. Number _____

(3) Cover Period 9, 19, 20 through 10, 2, 20 (4) Page 1 of 1

(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
(6) Sequence Number		Type	Occupation	Type	Description		
9, 19, 20	HEATHER CARLUTHERS 1314 NEWTON ST KEY WEST FL 33040	I	REACTOR	CAS			50. ⁰⁰
1							
9, 22, 20	DAVID ENKES 6463 SW 109 ST MIAMI FL 33156	I	RETIRED	CAS			1000. ⁰⁰
2							
9, 26, 20	NANCY LAWITZER 9140 SW 59 AVE MIAMI FL 33154	I	RETIRED	CAS			300. ⁰⁰
3							
9, 27, 20	BARRY LUBER 8831 SW 68 AVE PINECREST FL 33126	I	RETIRED	CAS			25. ⁰⁰
4							
10, 2, 20	KARYN CUNNINGHAM 13985 SW 72 CT PALMETTO BAY FL 33158	I	TEACHER	CAS			50. ⁰⁰
5							
1							
1							

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER

Name

(2) 10041 W SUBURBAN DR

Address (number and street)

PINECREST FL 33156

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER 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 9/1/20 To 9/30/20 Report Type: M9

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 2,800.00

Loans \$ _____

Total Monetary \$ 2,800.00

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 483.00

Transfers to Office Account \$ _____

Total Monetary \$ 483.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 17,525.00

(10) TOTAL Monetary Expenditures To Date

\$ 7,244.65

(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 or electioneering comm.) Treasurer Deputy Treasurer

X
Signature

(Type name)

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 9 11 20 through 9 130 20 (4) Page 1 of 2

(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
(6) Sequence Number		Type	Occupation	Type	Description		
9, 1, 20	CARMEN PALMIERI 5861 SW 132 TERR MIAMI FL 33156	I	RETIRED	CAS			50.00
1							
9, 2 20	JERRY HASHBULAN 6101 MOSS RANCH RD PINECREST FL 33156	I	RETIRED	CAS			100.00
2							
9, 9, 20	JASMINE GARDENS LLY 808 BRICKELL KEY DR # 1001 MIAMI FL 33131	B	ALF	CAS			250.00
3							
9, 9 20	JAMES COURTNEY 5930 SW 102 ST MIAMI FL 33156	I	ATTORNEY	CAS			100.00
4							
9, 17, 20	VRENY ARNOLD 6709 SW 88 ST # 202 PINECREST FL 33156	I	RETIRED	CAS			25.00
5							
9, 18, 20	CHARLES RUFFNER 6901 SW 94 ST PINECREST FL 33156	I	TAX ATTORNEY	CAS			100.00
6							
9, 19, 20	HEATHER CARRUTHERS 1314 NEWTON ST KEY WEST FL 33040	I	REALTOR	CAS			50.00
7							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 9 / 1 / 20 through 9 / 30 / 20 (4) Page 2 of 2

(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
(6) Sequence Number		Type	Occupation	Type	Description		
9, 22, 20	DANIEL ENCKES 6463 SW 107 ST MIAMI FL 33156	I	CAS	RETIREED			1000.00
8							
9, 24, 20	NANCY CAWTHOR 9140 SW 59 AVE MIAMI FL 33156	I	CAS	RETIREED			300.00
9							
9, 27, 20	GARY LIBEL 8831 SW 68 AVE PINECREST FL 33156	I	CAS	RETIREED			25.00
10							
9, 30, 20	JARED + LINDA DUYER 1781 PALMETTO CT PINECREST FL 33156	I	CAS	ATTORNEY TEACHER			800.00
11							
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOECKHAMMER (2) I.D. Number _____
 (3) Cover Period 9, 19, 20 through 10, 2, 20 (4) Page 1 of 1

(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					
9/29/20	ANNA HOECKHAMMER 10841 W SUBURBAN DR PINECREST FL 33156	COMMUNICATIONS SOCIAL MEDIA	RMB		400. ⁰⁰
1					
9/30/20	ANEDOT 5555 HILTON AVE SUITE 106 DATON ROUGE LA 70808	FEES	CAJ		83. ⁰⁰
2					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER

Name

(2) 10041 WEST SUBURBAN DR.

Address (number and street)

PINECREST FL 33156

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER, 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 8 / 1 / 20 To 8 / 31 / 20 Report Type: 8

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 750.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 750.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, 3,460.60

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, 3,460.60

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 14,725.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 6,761.65

(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) ANNA HOCHKAMMER

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

X 
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 8 / 1 / 20 through 8 / 31 / 20 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
8, 4, 20	MJ WRIGHT 6300 CHAPMAN FIELD DR MIAMI FL 33156	I	MANAGER	CAS			500.00
/		I	WRT WORLD ENTERPRISE	CAS			
8, 8, 20	PHILIP LETMAN 8791 SW 64 CT PINECREST FL 33156	I	INVESTOR	CAS			250.00
			SELF- EMPLOYED	CAS			
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHHAMMER (2) I.D. Number _____
 (3) Cover Period 8/1/20 through 8/31/20 (4) Page 1 of 1

(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					
8/30/20 /	ANEDOT 5355 HILTON AVE SUITE 106 BATON ROUGE LA 70808	FEE'S	CAN		30.60
8/11/20 2	HSA ENTERPRISES. 7300 N KENDALL DR SUITE 505 MIAMI FL 33156	PROMOTIONAL MATERIALS	CAN.		2550.00
8/27/20 3	ANNA HOCHHAMMER 10041 WEST SUBURBAN DR PINECREST FL 33156	COMMUNICATIONS	RMB		400.00
8/31/20 4	ANNA HOCHHAMMER 10041 W SUBURBAN DR PINECREST FL 33156	HOURLY HELP	RMB		480.00
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
 Name
 (2) 10041 WEST SUBURBAN DR.
 Address (number and street)
PINECREST FL 33184
 City, State, Zip Code

OFFICE USE ONLY
 Village of Pinecrest
 Office of the Village Clerk

 SEP 01 2020

 Guido H. Inguanzo, Jr.
 Village Clerk

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: COUNCILMEMBER, 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 8 / 1 / 20 To 8 / 31 / 20 Report Type: 8

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 750.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 750.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, 3,460.60

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, 3,460.60

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 14,725.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 6,761.65

(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) ANNA HOCHKAMMER

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

X [Signature]
 Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 8/1/20 through 8/31/20 (4) Page 1 of 1

(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
(6) Sequence Number		Type	Occupation	Type	Description		
8, 4, 20 /	MJ WRIGHT 6300 CHAPMAN FIELD DR MIAMI FL 33156	I	MANAGER WLT WORLD ENTREPRENEUR	CAS			500.00
8, 8, 20	PHILIP LEITMAN 8791 SW 44 CT PINECREST FL 33156	I	INVESTOR SELF- EMPLOYED	CAS			250.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ANNA HOCHHAMMER

(2) I.D. Number _____

(3) Cover Period 8/1/20 through 8/31/20

(4) Page 1 of 1

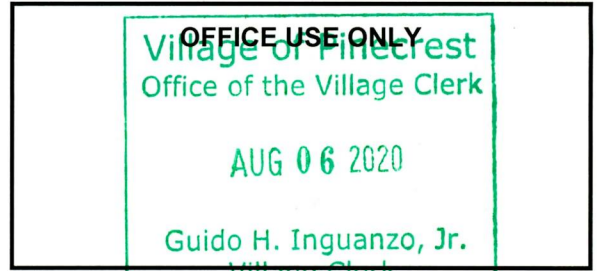
(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
8/30/20	ANEDOT 5355 HILTON AVE SUITE 106 BATON ROUGE LA 70805	FEE'S	CAN		30.60
1					
8/11/20	HSA ENTERPRISES. 7300 N KENDALL DR SUITE 505 MIAMI FL 33156.	PROMOTIONAL MATERIALS	CAN.		2550.00
2					
8/27/20	ANNA HOCHHAMMER 10041 WEST SUBURBAN DR PINECREST FL 33156.	COMMUNICATIONS	RMB		400.00
3					
8/31/20	ANNA HOCHHAMMER 10541 W SUBURBAN DR PINECREST FL 33156	HOURLY HELP	RMB		480.00
4					
11					
11					
11					
11					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 W SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code



(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: COUNCIL MEMBER, 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 7, 1, 20 To 7, 31, 20, Report Type: 7

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ ~~5,000~~ 5,975.00

Loans \$ _____ 0

Total Monetary \$ _____ 5,975.00

In-Kind \$ _____ 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ 456.70

Transfers to Office Account \$ _____

Total Monetary \$ _____ 456.70

(8) Other Distributions

\$ _____ 0

(9) TOTAL Monetary Contributions To Date

\$ _____ 13,975.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 3,301.05

(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) ANNA HOCHKAMMER

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

X _____
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 7, 1, 20 through 7, 31, 20 (4) Page 1 of 2

(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
(6) Sequence Number		Type	Occupation	Type	Description		Amount
7, 5, 20 1	CARLOS WOLF 6465 SW 109 ST PINECREST FL 33156	I	DOCTOR	CAS			250. ⁰⁰
7, 6, 20 2	DAMODAR LALITA AIRAN 9310 SW 71 AVE PINECREST FL 33156	I	ATTORNEY	CAS			100. ⁰⁰
7, 6, 20 3	STEVEN SILVERMAN 9900 SW 72 CT MIAMI FL 33156	I	ATTORNEY	CAS			125. ⁰⁰
7, 7, 20 4	WILLIAM HOCHKAMMER 1260 ARDMOOR DR BLOOMFIELD HILLS MI 48301	I	ATTORNEY	CHE			1000. ⁰⁰
7, 9, 20 5	MARCIA HOCHKAMMER 1260 ARDMOOR DR BLOOMFIELD HILLS, MI 48301	I	ATTORNEY	CHE			1000. ⁰⁰
7, 7, 20 6	SUE LOGZELLE 9275 SW 185 TERR CUTLER BAY, FL 33157	T	RETIRED	CAS			150. ⁰⁰
7, 8, 20 7	RUTHS LIST FL 100 E MADISON ST TAMPA FL 33602	F	PAC	CAS			500. ⁰⁰

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 7, 1, 20 through 7, 31, 20 (4) Page 2 of 2

(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
(6) Sequence Number							
7, 14, 20	JAMES CROSLAND 6301 SW 99 TERR MIAMI FL 33156	I	ATTORNEY	CAS			1000.00
8							
7, 22, 20	MIAMI REFLECTORS PAC 700 ROYAL PONCHANA BLVD STE 400 MIAMI SPRINGS FL 33166	F	PAC	CHE			100.00
9							
7, 23, 20	EMF + ASSOCIATES MIAMI SPRINGS FL 6761 SW 89 TERR MIAMI FL 33156	B	CONSULTING	CHE			250.00
10							
7, 27, 20	KATIE ABBOTT 6030 SW 116 ST PINECREST FL 33156	I	ELECTED OFFICIAL	CAS			100.00
11							
7, 31, 20	GOLDMAN RESIDENTIAL GROUP 10501 SW 71 AVE PINECREST FL 33156	B	REAL ESTATE	CAS			250.00
12							
7, 31, 20	ANN McMASTER 10700 SW 60 AVE PINECREST FL 33156	I	MARKETING	CAS			250.00
13							
1							
1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 7.1.20 through 7.31.20 (4) Page 1 of 1

(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
7/28/20 /	ANNA HOCHKAMMER 1004 W SUBLETTAN DR PINECREST FL 33156	SOCIAL MEDIA + COMMUNICATIONS	RMB		345. ⁰⁰
7/31/20 2	ANEDOT 5555 HILTON AVE SUITE 106 BATON ROUGE, LA 70808	FEES	CAN		111. ⁹⁰
//					
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//					
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//					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER

Name

(2) 10041 W SUBURBAN DR

Address (number and street)

PINECREST FL 33156

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

(4) Check appropriate box(es):

Candidate Office Sought: COUNCIL MEMBER, 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 7/1/20 To 7/31/20 Report Type: 7

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ ~~5,975.00~~ 5,975.00

Loans \$ _____ 0

Total Monetary \$ _____ 5,975.00

In-Kind \$ _____ 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ 456.70

Transfers to Office Account \$ _____

Total Monetary \$ _____ 456.70

(8) Other Distributions

\$ _____ 0

(9) TOTAL Monetary Contributions To Date

\$ _____ 13,975.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 3,301.05

(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) ANNA HOCHKAMMER

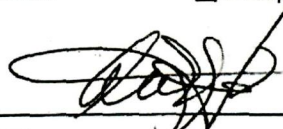
Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 

Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X 

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 7, 1, 20 through 7, 31, 20 (4) Page 1 of 2

(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
(6) Sequence Number		Type	Occupation	Type	Description		
7, 5, 20 1	CARLOS WOLF 6465 SW 109 ST PINECREST FL 33156	I	DOCTOR	CAS			250. ⁰⁰
7, 6, 20 2	DAMODAR LALITA AIRAN 9310 SW 71 AVE PINECREST FL 33156	I	ATTORNEY	CAS			100. ⁰⁰
7, 6, 20 3	STEVEN SILVERMAN 9900 SW 72 CT MIAMI FL 33156	I	ATTORNEY	CAS			125. ⁰⁰
7, 7, 20 4	WILLIAM HOCHKAMMER 1260 ARDMOOR DR BLOOMFIELD HILLS MI 48301	I	ATTORNEY	CHE			1000. ⁰⁰
7, 9, 20 5	MARCIA HOCHKAMMER 1260 ARDMOOR DR BLOOMFIELD HILLS, MI 48301	I	ATTORNEY	CHE			1000. ⁰⁰
7, 7, 20 6	SUE LOGELLE 9275 SW 185 TERR CUTLER BAY, FL 33157	T	RETIRED	CAS			150. ⁰⁰
7, 8, 20 7	RUTHS LIST FL 100 E MADISON ST TAMPA FL 33602	F	PAC	CAS			500. ⁰⁰

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 7, 1, 20 through 7, 31, 20 (4) Page 2 of 2

(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
(6) Sequence Number							
7, 14, 20	JAMES CROSLAND 6301 SW 99 TERR MIAMI FL 33156	I	ATTORNEY	CAS			1000.00
8							
7, 22, 20	MIAMI REALTORS PAC 700 ROYAL PONCIANA BLVD STE 400 MIAMI SPRINGS FL 33166	F	PAC	CHE			100.00
9							
7, 23, 20	EME + ASSOCIATES BRUNNENBERGER 6761 SW 89 TERR MIAMI FL 33156	B	CONSULTING	CHE			250.00
10							
7, 27, 20	KATIE ABBOTT 6030 SW 116 ST PINECREST FL 33156	I	ELECTED OFFICIAL	CAS			100.00
11							
7, 31, 20	GOLDMAN RESIDENTIAL GROUP 10501 SW 71 AVE PINECREST FL 33156	B	REAL ESTATE	CAS			250.00
12							
7, 31, 20	ANN McMASTER 10700 SW 60 AVE PINECREST FL 33156	I	MARKETING	CAS			250.00
13							
1							
1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ANNA HOCHHAMMER (2) I.D. Number _____
 (3) Cover Period 7.1.20 through 7.31.20 (4) Page 1 of 1

(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
7/28/20 /	ANNA HOCHHAMMER 10041 W SUBLETTAN DR PINECREST FL 33156	SOCIAL MEDIA + COMMUNICATIONS	RMB		345. ⁰⁰
7/31/20 2	ANEDOT 5555 HILTON AVE SUITE 106 BATON ROUGE, LA 70808	FEE'S	CAN		111.70
///					
///					
///					
///					
///					
///					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 W SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER, 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 6/1/2020 To 6/30/2020 Report Type: 6

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 5,000.00

Loans \$ _____

Total Monetary \$ 5,000.00

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 2,844.35

Transfers to Office Account \$ _____

Total Monetary \$ 2,844.35

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 8,000.00

(10) TOTAL Monetary Expenditures To Date

\$ 2,909.99

(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) ANNA HOCHKAMMER

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

X 
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 6 1 1 20 through 6 30 20 (4) Page 1 of 3

(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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
6 1 1 20 1	MARK CROFTON 1341 SW 110 TERR PINECREST FL 33156	I	SOFTWARE CA	CAS			100
6 1 2 20 2	NANCY LAWTER 9140 SW 59 AVE MIAMI FL 33156	I	RETIRED	CAS			300
6 1 5 20 3	LISA ASKOWITZ 10775 SW 63 AVE MIAMI FL 33156	I	RETIRED	CAS			100
6 1 16 20 4	MARI WELLS 6135 SW 116 ST MIAMI FL 33156	I	HOME MAKER	CAS			100
6 1 16 20 5	ERIC LITTMAN 6050 ROLLING RD DRIVE PINECREST FL 33156	I	ATTORNEY	CAS			250
6 1 17 20 6	CARA ALTAUIS 12510 RAMIRO ST CORAL GABLES	I	COACH	CAS			25
6 1 18 20 7	MARICA LYNCH 6940 SW 96 ST MIAMI FL 33156	I	COMMUNI- CATIONS CONSULTANT	CAS			250

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHHAMMER (2) I.D. Number _____
 (3) Cover Period 6, 1, 20 through 6, 30, 20 (4) Page 2 of 3

(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
(6) Sequence Number		Type	Occupation	Type	Description		
6, 18, 20	KATHRYN SORENSEN 13200 SW 69 AVE MIAMI FL 33156	I	RETIRED	CAS			100
8							
6, 22, 20	DONNA SHALALA 60 EDEEWATER DR APT 16F FL CORAL GABLES 33133	I	CONGRESS- WOMAN	CAS			1000.
9							
6, 22, 20	MAY MILAM 1480 SW 155 AVE DAVIE FL 33326	I	SUPER- MARKET EXECUTIVE	CAS			500
10							
6, 22, 20	AMY SHAPIRO 9450 SW 116 ST MIAMI FL 33156	I	COLLEGE COUNSELOR	CAS			100
11							
6, 22, 20	MARIANA PESIN 12950 SW 61 AVE PINECREST FL 33156	I	NONE	CAS			100
12							
6, 22, 20	GEOFFREY WILLIAMSON III 5501 OAK LANE CORAL GABLES FL 33156	I	AUTO DEALER	CAS			500
13							
6, 22, 20	MONA MARCUS 8925 SW 61 CT PINECREST FL 33156	I	ATTORNEY	CAS			100
14							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 6/1/20 through 6/30/20. (4) Page 3 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
6/22/20	SHANNA NYE 12624 SW 77 AVE MIAMI FL 33150	I	PHOTOGRAPHER CAS	CAS			100
15							
6/25/20	DANIELLE COHEN HIGGINS 17635 SW 83 CT PALMETTO BAY FL 33157	I	ATTORNEY	CAS			100
16							
6/27/20	ROBERT ROSS 6701 SW 94 ST PINECREST FL 33156	I	RETIRED	CAS			100
17							
6/22/20	THOMAS + CAROLE ABBOTT 6871 SW 138 ST PINECREST FL 33156	I	RETIRED	CHE			75
18							
6/22/20	JOHN & ANA STANHAM 6430 SW 126 ST RD PINECREST FL 33156	I	MANAGEMENT CONSULTANT	CHE			1000
19							
6/25/20	CYNTHIA BLANCH 6400 SW 123 TER MIAMI FL 33156	I	RETIRED	CAS			100
20							
1							
1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER

(2) I.D. Number _____

(3) Cover Period 6/1/20 through 6/30/20

(4) Page 1 of 1

(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
6/15/20 1	MDW COMMUNICATIONS LLC 2201 WISCONSIN AVE NW SUITE 200 WASHINGTON DC 20007	WEBSITE AND GRAPHICS.	CAN		2326. ⁰⁰
6/8/20 2	VILLAGE OF PINECREST 12645 PINECREST PARKWAY PINECREST FL 3356	QUALIFYING FEE	CAN		100. ⁰⁰
6/12/20 3	WEDELECT 10150 HIGHLAND MANOR DR. SUITE 200 TAMPA FL 33610	DATA	CAN		261. ⁹⁵
6/30/20 4	ANEDOT 1930 MCKINNES AVE DALLAS TX 75201	CONTRIBUTION SOFTWARE	CAN.		162. ⁴⁰
11					
11					
11					
11					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
 Name
 (2) 10041 W SUBURBAN DR
 Address (number and street)
PINECREST FL 33156
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: COUNCILMEMBER, 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 6/1/2020 To 6/30/2020 Report Type: 6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 5,000.00

Loans \$ _____

Total Monetary \$ 5,000.00

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 2,844.35

Transfers to Office Account \$ _____

Total Monetary \$ 2,844.35

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 8,000.00

(10) TOTAL Monetary Expenditures To Date

\$ 2,909.99

(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) ANNA HOCHKAMMER

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

[Signature]

X
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

[Signature]

X
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 6/1/20 through 6/30/20 (4) Page 1 of 3

(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
(6) Sequence Number							
6/11/20	MARK CROFTON 1341 SW 110 TER PINECREST FL 33156	I	SOFTWARE SA	CAS			100
1							
6/12/20	NANCY LAUTNER 9140 SW 59 AVE MIAMI FL 33156	I	RETIRED	CAS			300
2							
6/15/20	LISA RSKOWITZ 10775 SW 63 AVE MIAMI FL 33156	I	RETIRED	CAS			100
3							
6/16/20	MARI WELLS 6135 SW 116 ST MIAMI FL 33156	I	HOMEMAKER	CAS			100
4							
6/16/20	ERIC LITTMAN 6050 ROLLING RD DRIVE PINECREST FL 33156	I	ATTORNEY	CAS			250
5							
6/17/20	CARA ALTVIS 12510 RAMIRO ST CORAL GABLES	I	COACH	CAS			25
6							
6/18/20	MARIKA LYNCH 6940 SW 96 ST MIAMI FL 33156	I	COMMUNI- CATIONS CONSULTANT	CAS			250
7							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 6, 1, 20 through 6, 30, 20 (4) Page 2 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
6, 18, 20	KATHLYN SORENSEN 13200 SW 69 AVE MIAMI FL 33156	I	RETIRED	CAS			100
8							
6, 22, 20	DONNA SHALALA 60 EDGEWATER DR APT 16E FL CORAL GABLES 33133	I	CONGRESS- WOMAN	CAS			1000.
9							
6, 22, 20	MAY MILAM 1480 SW 155 AVE DAVIE FL 33326	I	SUPER- MARKET EXECUTIVE	CAS			500
10							
6, 22, 20	AMY SHAPIRO 7450 SW 116 ST MIAMI FL 33156	I	COLLEGE COUNSELOR	CAS			100
11							
6, 22, 20	MARIANA PESIN 12950 SW 61 AVE PINELAKE FL 33156	I	NONE	CAS			100
12							
6, 22, 20	GEOFFREY WILLIAMSON III 5501 OAK LANE CORAL GABLES FL 33156	I	AUTO DEALER	CAS			500
13							
6, 22, 20	MONA MARCUS 8925 SW 61 CT PINELAKE FL 33156	I	ATTORNEY	CAS			100
14							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____

(3) Cover Period 6/1/20 through 6/30/20. (4) Page 3 of 3

(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
(6) Sequence Number		Type	Occupation	Type	Description		
6/22/20	SHANNA NYE 12624 SW 77 AVE MIAMI FL 33150	I	PHOTOGRAPHER CAS	CAS			100
15							
6/25/20	DANIELLE COHEN HIGGINS 17635 SW 83 CT PALMETTO BAY FL 33157	I	ATTORNEY	CAS			100
10							
6/27/20	ROBERT ROSS 6701 SW 94 ST PINECREST FL 33156	I	RETIRED	CAS			100
17							
6/22/20	THOMAS + CAROLE ABBOTT 6871 SW 128 ST PINECREST FL 33156	I	RETIRED	CHE			75
18							
6/22/20	JOHN & ANA STANTON 6430 SW 126 ST RD PINECREST FL 33156	I	MANAGEMENT CONSULTANT	CHE			1000
19							
6/25/20	CYNTHIA BLANCK 6400 SW 123 TERP MIAMI FL 33156	I	RETIRED	CAS			100
20							
1							
1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ANNA HOCHKAMMER (2) I.D. Number _____
 (3) Cover Period 6/1/20 through 6/30/20 (4) Page 1 of 1

(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
6/15/20 1	MDW COMMUNICATIONS LLC 2201 WISCONSIN AVE NW SUITE 200 WASHINGTON DC 20007	WEBSITE AND GRAPHICS.	CAN		2320.00
6/8/20 2	VILLAGE OF PINECREST 12645 PINECREST PARKWAY PINECREST FL 3356	QUALIFYING FEE	CAN		100.00
6/12/20 3	WEDGELECT 10150 HIGHLAND MANOR DR. SUITE 200 TAMPA FL 33610	DATA	CAN		261.95
6/30/20 4	ANEDOT 1900 MCKINNEY AVE DALLAS TX 75201	CONTRIBUTION SOFTWARE	CAN.		162.40
11					
11					
11					
11					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
 Name
 (2) 10041 WEST SUBURBAN DR
 Address (number and street)
PINECREST FL 33156
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

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

(5) Report Identifiers

Cover Period: From 5/1/2020 To 5/31/2020 Report Type: 5

- 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 \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions \$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 3,000.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 65.64

(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:

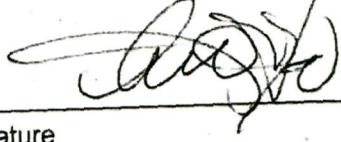
(Type name) ANNA HOCHKAMMER

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

X 
 Signature

(Type name) ANNA HOCHKAMMER

- Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 WEST SUBURBAN DR
Address (number and street)
PINECREST FL 33156
City, State, Zip Code

Check here if address has changed

Village of Pinecrest
OFFICE USE ONLY
Office of the Village Clerk

MAY 05 2020

Guido H. Inguanzo, Jr.
Village Clerk

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: COUNCILMEMBER, 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 4 11 2020 To 4 30 2020 Report Type: 4

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	\$	___	___	___	0.00
Transfers to Office Account	\$	___	___	___	0.00
Total Monetary	\$	___	___	___	0.00

(8) Other Distributions

\$ ___ , ___ , ___ 0.00

(9) TOTAL Monetary Contributions To Date

\$ ___ , ___ , 3,000.00

(10) TOTAL Monetary Expenditures To Date

\$ ___ , ___ , 65.64

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

X 
Signature

(Type name) ANNA HOCHKAMMER
 Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
 Name
 (2) 10041 WEST SUBURBAN DR
 Address (number and street)
PINECREST FL 33156
 City, State, Zip Code

Village Office Use Only
 Office of the Village Clerk

APR 01 2020

Guido H. Inguanzo, Jr.
 Village Clerk

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER, SEA 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 3, 1, 1, 2020 To 3, 31, 1, 2020 Report Type: 3

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	\$	___	___	___	0.00
Transfers to Office Account	\$	___	___	___	0.00
Total Monetary	\$	___	___	___	0.00

(8) Other Distributions
 \$ ___ , ___ , ___ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ ___ , ___ 3,000.00

(10) TOTAL Monetary Expenditures To Date
 \$ ___ , ___ 65.64

(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) ANNA HOCHKAMMER

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

[Signature]
 Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

[Signature]
 Signature

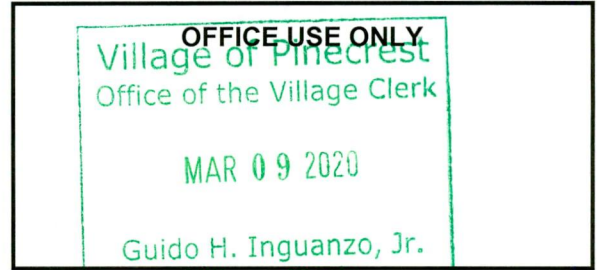
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 WEST SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COUNCILMEMBER 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 2/1/2020 To 2/29/2020 Report Type: 2

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 \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 3,000.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 65.64

(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) ANNA HOCHKAMMER

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

X
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X
Signature

Instructions for Campaign Treasurer's Report Summary

(1) **Name:** full name of the candidate, political committee, party executive committee, electioneering communications organization, or individual making an independent expenditure or electioneering communication.

(2) **Address:** the full address or post office box, city, state, and zip code.
 Check the box if the address has changed since the last report filed.

(3) **ID Number:** identification number assigned by the filing officer.

(4) **Check the appropriate box(es).**

(5) **Report Identifiers**

Cover Period: the dates this report covers (i.e., From 1/1/15 To 1/31/55). **Important:** use the appropriate cover period dates as published by the filing officer.

Report Type: refer to the filing officer's calendar of reporting dates for the correct codes to be used for each reporting period. If report is for a **special election** add "S" in front of the report code (i.e., SG3).

Check one of the appropriate boxes:

- Original: first report filed for this reporting period.
- Amendment: must summarize only contributions/fund transfers and expenditures/distributions being reported as additions or deletions. Read instructions for sequence numbers and amendment types on the back of Forms DS-DE 13A and 14A.
- Special Election Report: **Important:** once a special election report is filed, the entity is required to file all remaining reports due for the special election.

(6) **Contributions This Report:**

Cash and Checks: total amount for this reporting period.

Loans: total amount for this reporting period.

Total Monetary: sum of Cash and Checks and Loans.

In-Kind: the fair market value of the in-kind contribution at the time it is given for this reporting period.

(7) **Expenditures This Report:**

Monetary Expenditures: total amount of monetary expenditures for this reporting period.

Transfers to Office Account: total amount transferred to an office account by elected candidates only.

Total Monetary: sum of Monetary Expenditures and Transfers to Office Account.

(8) **Other Distributions:** the total amount of goods and services contributed to a candidate or other committee by a PC, ECO, or PTY.

(9) **TOTAL Monetary Contributions To Date:** the amount of total monetary contributions to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.

(10) **TOTAL Monetary Expenditures To Date:** the amount of total monetary expenditures to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.

(11) **Type or print the required officer's name and have them sign the report:**

- Candidate report: treasurer and candidate must sign.
- PC report: treasurer and chairperson must sign.
- PTY report: treasurer and chairperson must sign.
- ECO report: organization's treasurer must sign.
- IE or EC report: individual must sign (this applies when an individual acts alone to make these expenditures)

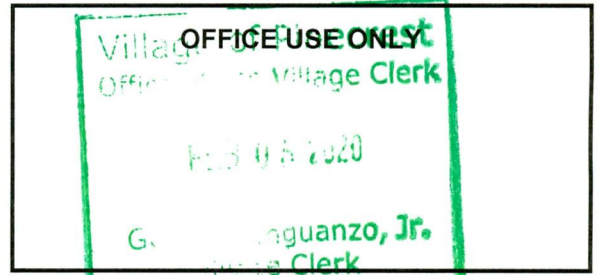
AMENDMENT REPORTS: An amendment report summary should summarize only contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94.

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANNA HOCHKAMMER
Name

(2) 10041 WEST SUBURBAN DR
Address (number and street)

PINECREST FL 33156
City, State, Zip Code



(3) ID-Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: COUNCILMEMBER 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 1 / 1 / 2020 To 1 / 31 / 2020 Report Type: 1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, _____

Loans \$ _____, 3,000.00

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, 3,000.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 65.64

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 65.64

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 3,000.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 65.64

(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) ANNA HOCHKAMMER

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

X [Signature]
Signature

(Type name) ANNA HOCHKAMMER

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA HECHKAMMER (2) I.D. Number _____

(3) Cover Period 1 / 1 / 2020 through 1 / 31 / 2020 (4) Page 1 of 1

(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
1 / 3 / 20	ANNA HECHKAMMER 10041 W SUBURBAN DR PINECREST FL 33156	S	HOMEMAKER	LOA			3,000
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANNA HOCHHAMMER

(2) I.D. Number _____

(3) Cover Period 1, 1, 20 through 1, 31, 20

(4) Page 1 of 1

(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					
1/21/20	HARLAND CLARK 5800 NORTHWEST PKWY SAN ANTONIO, TX 78249	CHECKS.	CAN		65.64
/ /					
/ /					
/ /					
/ /					
/ /					
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**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

Village of Pinecrest
Office of the Village Clerk

JAN 07 2020

Guido H. Inguanzo, Jr.
Village Clerk

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

ANNA MARSH HOCHKAMMER

3. Address (include post office box or street, city, state, zip code)

10041 WEST SUBURBAN DR
PINECREST FL 33156

4. Telephone

(305) 335 7555

5. E-mail address

ahochkammer@gmail.com

6. Office sought (include district, circuit, group number)

COUNCIL MEMBER, SEAT 1

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my

Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

ANNA HOCHKAMMER

11. Mailing Address

10041 WEST SUBURBAN DR

12. Telephone

(305) 335 7555

13. City

PINECREST

14. County

MIAMI-DADE

15. State

FL

16. Zip Code

33156

17. E-mail address

ahochkammer@gmail.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

WELLS FARGO

20. Address

11765 SOUTH DIXIE HWY.

21. City

PINECREST

22. County

MIAMI-DADE

23. State

FL

24. Zip Code

33156

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

Jan 7, 2020

26. Signature of Candidate

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, ANNA HOCHKAMMER, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

Jan 7, 2020
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY
Village of Pinecrest
Office of the Village Clerk

JAN 07 2020

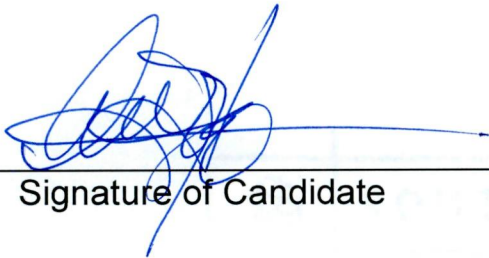
Guido H. Inguanzo, Jr.
Village Clerk

I, ANNA HOCHKAMMER ,

candidate for the office of COUNCILMEMBER, SEAT 1 ;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

Jan. 7, 2020

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).