

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Raphael A. Sanchez

Name

(2) 8360 SW 135 Street

Address (number and street)

Pinecrest, FL 33156

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

VILLAGE OF PINECREST
OFFICE OF THE VILLAGE CLERK

APR 03 2024 *(3 pgs)*

PRISCILLA TORRES, MMC
VILLAGE CLERK

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Village Council, Seat 3

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 01 / 01 / 24 To 03 / 31 / 24 Report Type: 2024Q1

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____

(10) TOTAL Monetary Expenditures To Date

\$ _____

(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) Jacqueline Cundins

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

Jacqueline Cundins
Signature

(Type name) Raphael A. Sanchez

Candidate Chairperson (only for PC and PTY)

Raphael A. Sanchez
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Raphael A. Sanchez (2) I.D. Number _____

(3) Cover Period 01 / 01 / 24 through 03 / 31 / 24 (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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Raphael A. Sanchez

(2) I.D. Number _____

(3) Cover Period 01 / 01 / 24 through 03 / 31 / 24

(4) Page 3 of 3

(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					
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