

# 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

(4) Check appropriate box(es):

Candidate Office Sought: Village Council, Seat 3

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

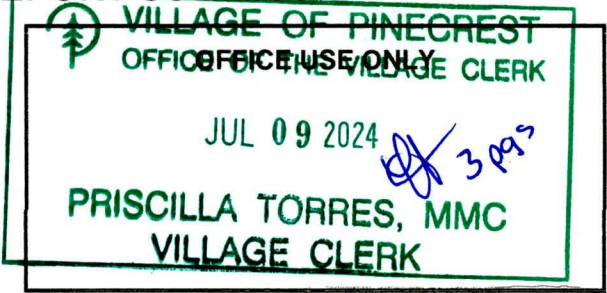
Independent Expenditure (IE) (also covers an individual making electioneering communications)

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

(3) ID Number: \_\_\_\_\_



## (5) Report Identifiers

Cover Period: From 04 / 01 / 24 To 06 / 30 / 24 Report Type: 2024Q2

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Loans \$ \_\_\_\_\_ , 1,000 . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 1,000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 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) Jacqueline Cundins

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

**X** Jacqueline Cundins  
Signature

(Type name) Raphael A. Sanchez

Candidate  Chairperson (only for PC and PTY)

**X** [Signature]  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 04 / 01 / 24 through 06 / 30 / 24 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(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				
06 / 14 / 24	1	Raphael A. Sanchez 8360 SW 135 Street Pinecrest, FL 33156	S	Attorney	LOA			\$1,000.00
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Raphael A. Sanchez

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 04 / 01 / 24 through 06 / 30 / 24

(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					
06 / 14 / 24	Village of Pinecrest 12645 Pinecrest Parkway Pinecrest, FL 33156	Filing Fee	CAN		\$100.00
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					