

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **HENRY ROSENTHAL**

OFFICE USE ONLY

(2) **PO BOX 1**

Name  
Address (number and street)

ISLAMORADA, FL 33036

City, State, Zip Code

Check here if address has changed

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

2022-12-28 A11:00

(4) Check appropriate box(es):

Candidate Office Sought: **ISLAMORADA VILLAGE COUNCIL, SEAT 4**

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 / 1 / 22 To 10 / 7 / 22 Report Type: 61

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ 1,200.00

Loans \$ 0.00

Total Monetary \$ 1,200.00

In-Kind \$ 0.00

### (7) Expenditures This Report

Monetary Expenditures \$ 10.10

Transfers to Office Account \$ 0.00

Total Monetary \$ 10.10

### (8) Other Distributions

\$ 0.00

### (9) TOTAL Monetary Contributions To Date

\$ 9,845.00

### (10) TOTAL Monetary Expenditures To Date

\$ 5,025.89

### (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) **THOMAS R McDONALD**

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

X Thomas R McDonald  
Signature

(Type name) **HENRY ROSENTHAL**

Candidate  Chairperson (only for PC and PTY)

X H. Rosenthal  
Signature

## CAMPAIN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name **HENRY ROSENTHAL**

**(2) LD. Number**

(3) Cover Period 10 / 1 / 22 through 10 / 1 / 22

(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)	(11)
(6) Sequence Number					
10 / 9 / 22	STRIFE 14106 SW 288 ST HOMESTEAD, FL 33033	STRIFE TRANSFER FEE	MON		10.10
1					
10 / 5 / 22	KEY WEST CITIZEN 200 E VENICE AVE VENICE, FL 34295	PRINT AD	MON	DEL	- 960.00
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					