

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **PETER BACHELER**

Name

(2) **89240 OVERSEAS HWY, UNIT 12**

Address (number and street)

**TAVERNIER, FL 33070**

City, State, Zip Code

☐ Check here if address has changed

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

OFFICE USE ONLY

2022-07-11 A10:46

(4) Check appropriate box(es):

☒ Candidate Office Sought: **ISLAMORADA VILLAGE COUNCIL, 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 / 2022** To **6 / 30 / 2022**

Report Type: **22-M**

☐ Original

☐ Amendment

☐ Special Election Report

## (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_ 50 . 00

Total Monetary \$ \_\_\_\_\_

In-Kind \$ \_\_\_\_\_

## (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ 0 . 00

## (8) Other Distributions

\$ \_\_\_\_\_

## (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ 50 . 00

## (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ 0 . 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) **THOMAS R McDONALD**

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

x **Thomas R McDonald**

Signature

(Type name) **PETER BACHELER**

☒ Candidate ☐ Chairperson (only for PC and PTY)

x **Peter Bacher**

Signature

### CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name PETER BACHELER

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

(3) Cover Period 6 / 1 / 2022 through 6 / 30 / 2022

(4) Page 1 of 1

[illegible]

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

(1) Name PETER BACHELER

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

(3) Cover Period 5 / 1 / 2022 through 5 / 30 / 2022

(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					
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