

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **Thomas Raffanello**

Name

(2)

Address (number and street)

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

2022-08-10 A08:44

(4) Check appropriate box(es):

Candidate      Office Sought: Village of Islamorada City Council - Seat 5

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 07 / 01 / 22 To 07 / 31 / 22 Report Type: M7

Original       Amendment       Special Election Report

### (6) Contributions This Report

Cash & Checks      \$       ,      , 550. 00

Loans      \$       ,      , 5, 000 . 00

Total Monetary      \$       ,      , 5, 550 . 00

In-Kind      \$       ,      ,      .      .

### (7) Expenditures This Report

Monetary Expenditures      \$       ,      , 2, 550 . 00

Transfers to Office Account      \$       ,      ,      .      .

Total Monetary      \$       ,      ,      .      .

### (8) Other Distributions

\$       ,      ,      .      .

### (9) TOTAL Monetary Contributions To Date

\$       ,      , 5, 550 . 00

### (10) TOTAL Monetary Expenditures To Date

\$       ,      , 2, 550 . 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 Raffanello**

Individual (only for IE or electioneering comm.)

Treasurer

Deputy Treasurer

X

Signature

(Type name)

**Thomas Raffanello**

Candidate

Chairperson (only for PC and PTY)

X

Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Thomas Raffanello

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

(3) Cover Period 07 / 01 / 22 through 07 / 31 / 22 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Contributor Type	Occupation	Contribution Type	In-kind Description		
07 01 22 / /	Robert Johnson 80901 Old Hwy. Islamorada, FL 33036	I		CHE			50.00
M7-1							
07 25 22 / /	Thomas Raffanello	I	Retired	LOA			5,000.00
M7-2							
07 29 22 / /	Phyllis Mitchel P.O. Box 845 Islamorada, FL 33036	I	Retired	CHE			500.00
M7-3							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Thomas Raffanello

**(2) I.D. Number**

**(3) Cover Period** 07 / 01 / 22    through 07 / 31 / 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					
07 / 26 / 22	Dominic Albanese 7811 N. Causeway Blvd. St. Petersburg, FL 33548	Website, sign, flyer design	CAN		2550.00
M7-1					
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