

OFFICE ACCOUNT REPORT

(Section 106.141, F.S.)

(PLEASE TYPE)

~~MARGATE~~
OFFICE USE ONLY

SEP 29 2025

QUALIFYING OFFICES

Name <i>ANTHONY N. CAGGIANO</i>	Office to Which Elected <i>MARGATE CITY COMMISSIONER SEAT #1</i>		
Address <i>5790 MARGATE BLVD</i>	City <i>MARGATE</i>	State <i>FL</i>	Zip Code <i>33063</i>
Name of Bank <i>TRUIST</i>			
Address <i>7282 W. ATLANTIC BLVD</i>	City <i>MARGATE</i>	State <i>FL</i>	Zip Code <i>33063</i>

This report contains 0 pages of Deposits and
Disbursements, upon which I have written my initials covering the period of
7/1/2025 through 9/30/2025.

Balance on hand at beginning of reporting period	\$ <u>2,480 ⁸⁹ _{xx}</u>
Deposits during reporting period	\$ <u>0</u>
Disbursements during reporting period	\$ <u>0</u>
Balance on hand at end of reporting period	\$ <u>2,480 ⁸⁹ _{xx}</u>

I, ANTHONY N. CAGGIANO, certify that this report
is complete, true and correct.

X


Signature of Elected Official

MARGATE

SEP 29 2025

**OFFICE ACCOUNT
DISBURSEMENT OR DEPOSIT INFORMATION**

(PLEASE TYPE)

QUALIFYING OFFICES

DATE	NAME AND ADDRESS	PURPOSE	AMOUNT	
			Disbursement	Deposit
ELECTED OFFICIAL'S INITIALS			TOTAL	TOTAL