

OFFICE ACCOUNT REPORT

(Section 106.141, F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

MARGATE
JUL 06 2021
QUALIFYING OFFICES

Name <i>ARLENE SCHWARTZ</i>		Office to Which Elected <i>MARGATE CITY COMMISSION</i>	
Address <i>7800 NW FIRST STREET</i>	City <i>MARGATE</i>	State <i>FL</i>	Zip Code <i>33063</i>
Name of Bank <i>WELLS FARGO</i>			
Address <i>400 N. STATE ROAD 7</i>	City <i>MARGATE</i>	State <i>FL</i>	Zip Code <i>33063</i>

This report contains 1 pages of Deposits and Disbursements, upon which I have written my initials covering the period of 4/1/2021 through 6/30/2021.

Balance on hand at beginning of reporting period \$ 2186.00
Deposits during reporting period \$ 0
Disbursements during reporting period \$ 90.00
Balance on hand at end of reporting period \$ 2096.00

I, ARLENE R SCHWARTZ, certify that this report is complete, true and correct.

X *Arlene R. Schwartz*
Signature of Elected Official

MARGATE

JUL 06 2021
QUALIFYING OFFICES

OFFICE ACCOUNT DISBURSEMENT OR DEPOSIT INFORMATION

(PLEASE TYPE)

DATE	NAME AND ADDRESS	PURPOSE	AMOUNT	
			Disbursement	Deposit
6/24/2021	COKEBURY UNITED METHODIST CHURCH	DONATION	90.00	0
ELECTED OFFICIAL'S INITIALS			TOTAL	TOTAL
AS			90.00	0