

**CAMPAIGN TREASURER'S REPORT SUMMARY**

**MARGATE**

OFFICE USE ONLY

JUL 10 2019

QUALIFYING OFFICES

(1) Anthony N. Caggiano  
Name

(2) 7856 NW 1st Street  
Address (number and street)

Margate, Fl. 33063  
City, State, Zip Code

Check here if address has changed

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

(4) Check appropriate box(es):

Candidate Office Sought: Margate City Commissioner 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 05 / 01 / 2019 To 05 / 31 / 2019 Report Type: M52019

Original

Amendment

Special Election Report

**(6) Contributions This Report**

Cash & Checks \$ \_\_\_\_\_, \_\_\_\_\_, 100.00

Loans \$ \_\_\_\_\_, \_\_\_\_\_, 00

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 100.00

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

**(7) Expenditures This Report**

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, 00

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

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 00

**(8) Other Distributions**

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_, \_\_\_\_\_, 150.00

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_, \_\_\_\_\_, 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) Anthony N. Caggiano  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

[Signature]  
Signature

(Type name) Anthony N. Caggiano  
 Candidate  Chairperson (only for PC and PTY)

[Signature]  
Signature

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

(1) Name **Anthony N. Caggiano**

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

**MARGATE**

(3) Cover Period 05 / 01 / 2019 through 05 / 31 / 2019

(4) Page 1 of 1

**JUL 10 2019**

**QUALIFYING OFFICES**

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
05 / 10 / 2019	Antonio V. Arserio PA [REDACTED]	B	R/E PROFESSIONAL ASSOCIATION	CHE			\$100.00
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