

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

**MARGATE
OFFICE USE ONLY**

**NOV 12 2019
QUALIFYING OFFICES**

(1) Thomas Ruzzano
Name

(2) 116 East Palm Drive
Address (number and street)

Margate, Florida, 33063
City, State, Zip Code

(3) ID Number: _____

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

- Candidate (office sought): Margate City Commissioner, Seat #4
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee
- Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 1 / 2019 To 10 / 30 / 2019 Report Type 2019 M10

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u> </u>	\$0.00
Loans	\$	<u> </u>	\$0.00
Total Monetary	\$	<u> </u>	\$0.00
In-Kind	\$	<u> </u>	\$0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u> </u>	0.00
Transfers to Office Account	\$	<u> </u>	0.00
Total Monetary	\$	<u> </u>	0.00

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 17,150.00

(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 Ruzzano

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Thomas Ruzzano

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

MARGATE

(1) Name Thomas Ruzzano

(2) I.D. Number _____

(3) Cover Period 10/1/2019 / _____ / _____ through 10/31/2019 / _____ / _____

(4) Page 1 of 1 **NOV 12 2019**

QUALIFYING OFFICES

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
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MARGATE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Thomas Ruzzano

(2) I.D. Number NOV 12 2019

(3) Cover Period 10/1/2019 / / through 10/31/2019 / /

(4) Page 1 of 1

QUALIFYING OFFICES

(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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