

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ARLENE R. SCHWARTZ  
Name

(2) 7800 NW FIRST 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 COMMISSION SEAT 2

Political Committee (PC)

Electioneering Communications Org. (ECO)

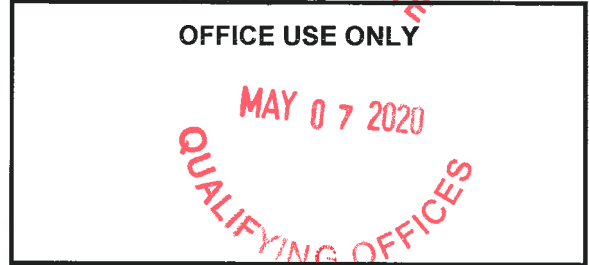
Party Executive Committee (PTY)

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 4 / 01 / 2020 To 4 / 30 / 2020 Report Type: 2020 M4

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_, \_\_\_\_\_, 75.00

Loans \$ \_\_\_\_\_, \_\_\_\_\_, 0

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 75.00

In-Kind \$ \_\_\_\_\_, \_\_\_\_\_, 0

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, 0

Transfers to Office Account \$ \_\_\_\_\_, \_\_\_\_\_, 0

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 0

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, 0

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 5,525.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 146.40

## (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) ARLENE R. SCHWARTZ

Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X Arlene R. Schwartz  
Signature

(Type name) ARLENE R. SCHWARTZ

Candidate  Chairperson (only for PC and PTY)

X Arlene R. Schwartz  
Signature

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

MARGATE

(1) Name ARLENE R. SCHWARTZ (2) I.D. Number \_\_\_\_\_

(3) Cover Period 4 / 01 / 2020 through 4 / 30 / 2020 (4) Page 1 of 1

MAY 07 2020  
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
(6) Sequence Number		Type	Occupation	Type	Description		
4 / 01 / 20 1	BETTY McQUADE I 6520 SW 5TH PLACE MARGATE, FL 33068		RETIRED	CHE			\$75.00
/ /							
/ /							
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# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

MARGATE

(1) Name ARLENE R. SCHWARTZ

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

(3) Cover Period 4 / 01 / 2020 through 4 / 30 / 2020

(4) Page \_\_\_\_\_ of 7 MAY 7 2020

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
/ /	NONE				
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