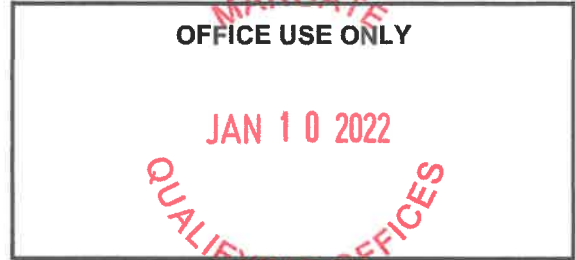


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Thomas Ruzzano
 Name
 (2) 116 East Palm Drive
 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 #4
- 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 12 / 1 / 2021 To 12 / 31 / 2021 Report Type: 2021 M12

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 3 , 000 . 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) Thomas Ruzzano
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) Thomas Ruzzano
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

MARGATE

(1) Name Thomas Ruzzano

(2) I.D. Number _____

(3) Cover Period 12 / 1 / 2021 through 12 / 31 / 2021

(4) Page 1 of 1

QUALIFYING OFFICES
JAN 10 2022

(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
(6) Sequence Number		Type	Occupation				
/ /	N/A						N/A
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Thomas Ruzzano

(2) I.D. Number _____

(3) Cover Period 12 / 1 / 2021 through 12 / 31 / 2021

(4) Page 10 of 2022

(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
/ /	N/A	N/A	N/A	N/A	N/A
/ /					
/ /					
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MARGATE
QUALIFYING OFFICES