

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ron Catronio
Name

(2) 1625 NW 69 AVE
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: COMMISSION SEAT 5
- 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 2/1/22 To 2/28/22 Report Type: 2022 MZ
 Original Amendment Special Election Report 2022 TR

(6) Contributions This Report

Cash & Checks \$ 0 , ____ . ____

Loans \$ 200 , ____ . ____

Total Monetary \$ 200 , ____ . ____

In-Kind \$ 0 , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 242.44 . ____

Transfers to Office Account \$ ____ , ____ . ____

Total Monetary \$ 242.44 . ____

(8) Other Distributions

\$ 0 , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 200 , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 353.41 , ____ . ____

(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) Ron Catronio

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

[Signature]
Signature

(Type name) Mary Ann Catronio

Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

MARGATE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Ron Cotroneo (2) I.D. Number _____

(3) Cover Period 2/1/22 through 2/28/22 (4) Page MAR 04 2022 of _____

QUALIFYING OFFICER'S

(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
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Mary Ann Cotroneo

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Ron Catronio (2) I.D. Number _____

(3) Cover Period 2/1/22 through 2/28/22 (4) Page 1 of 1


MARGATE

MAR 04 2022

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
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N/A



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Mary Ann Catronio