BAL HARBOUR VILLAGE
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CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) Jaime M Sanz
Name

(2) 10140 Collins Ave #302N
Address (number and street)

Bal Harbour FL 33154
City, State, Zip Code

☐ **Check here if address has changed**

(3) ID Number:

(4) Check appropriate box(es):

☒ Candidate Office Sought: Councilman District 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 09 / 01 / 16 To 09 / 30 / 16 Report Type: M9

☒ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks $ ___ , ___ , ___ . ___

Loans $ ___ , ___ , ___ . ___

Total Monetary $ ___ , ___ , ___ . ___

In-Kind $ ___ , ___ , ___ . ___

(7) Expenditures This Report

Monetary Expenditures $ ___ , ___ , 29 . 98

Transfers to Office Account $ ___ , ___ , ___ . ___

Total Monetary $ ___ , ___ , 29 . 98

(8) Other Distributions

$ ___ , ___ , ___ . ___

(9) TOTAL Monetary Contributions To Date

$ ___ , 1 , 600 . 00

(10) TOTAL Monetary Expenditures To Date

$ ___ , ___ , 43 . 98

(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) Jaime M Sanz

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

X
Signature

(Type name) Jaime M Sanz

☒ Candidate ☐ Chairperson (only for PC and PTY)

X
Signature

SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jaime M Sanz (2) I.D. Number

(3) Cover Period 09/01/16 through 09/30/16 (4) Page 1 of 1

(5) Date / (6) Sequence Number	(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
09/17/16 /	VISTAPRINT P.O. BOX 842862 BOSTON MA. 02284	CARD	MON		$29.98
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DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES