

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **HENRY ROSENTHAL**

Name

(2) **PO BOX 1**

Address (number and street)

ISLAMORADA, FL 33036

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

2022-09-12 A09:46

(4) Check appropriate box(es):

☒ Candidate Office Sought:

ISLAMORADA VILLAGE COUNCIL, 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 8 / 1 / 2022 To 8 / 31 / 2022 Report Type: M8

☐ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . _____

Loans \$ _____ , _____ , 0 . _____

Total Monetary \$ _____ , _____ , 0 . _____

In-Kind \$ _____ , _____ , 0 . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 120 . 00

Transfers to Office Account \$ _____ , _____ , 0 . _____

Total Monetary \$ _____ , _____ , 120 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 550 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 125 . 60

(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 R McDONALD**

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

X Thomas R McDonald
Signature

(Type name) **HENRY ROSENTHAL**

☒ Candidate ☐ Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name HENRY ROSENTHAL (2) I.D. Number _____

(3) Cover Period from 8 / 1 / 2022 through 8 / 31 / 2022 (4) Page 1 of 1

(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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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name HENRY ROSENTHAL

(2) I.D. Number _____

(3) Cover Period 8 / 1 / 2022 through 8 / 31 / 2022

(4) Page 1 of 1

(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
8 / 1 / 2022	ISLAMORADA, VILLAGE OF ISLANDS 86800 OVERSEAS HWY ISLAMORADA, FL 33036	CANDIDATE FILING FEE			
1			NON		120.00
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