CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Jorge Fors	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	1415 Algeria Avenue	[1275934]							
	Address (number and street)	Submitted on:							
	Coral Gables, FL 33134	8/12/2022 15:30:14 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 2530							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: County Commission District 06 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PT or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 								
	(5) Report	Identifiers							
Cove	er Period: From 7 / 2 / 2022 To	7 / <u>15</u> / <u>2022</u> Report Type: <u>22P3</u>							
0	riginal 🖾 Amendment 🗌 Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	n & Checks \$,1 , 954 . 91	Monetary Expenditures \$, , 0 . 00							
Loar	s , , ,	Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$,1 , 954 . 91	Total Monetary \$, , _ 0 . 00							
In-Ki	nd \$,,,000								
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>287</u> , <u>866</u> . <u>34</u>	\$, <u>268</u> , <u>348</u> . <u>80</u>							
_(T)	(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) (Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		_X							
Sig	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

1) Name Jorge Fors					2530				
	7/2/202	2		7/15/	2022				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of ¹	

(7) Full Name			(9)	(10)	(11)	(12)
(Last, Suffix, First, Middle)						
SCHOOL CONTRACTOR CONT		WITH THE PROPERTY OF THE PARTY	SERVICE SERVIC		Amendment	Amount
YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146	В	prorated	RE	Весеприон	Add	\$-733.0
PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146	В	prorated refund	RE		Add	\$-733.0
HOLMAN BUGENE			DE		7.2.2	ė 400 7
WOLMAN, EUGENE ***Protected Voter***	В	refund	RE		Add	\$-488.7
	<u> </u>					
1	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code Type YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 WOLMAN, EUGENE B	Clast, Suffix, First, Middle) Street Address & City, State, Zip Code YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 WOLMAN, EUGENE B prorated refund B prorated refund B prorated refund	Contributor Street Address & Contributor City, State, Zip Code Type Cocupation Type YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 WOLMAN, EUGENE B prorated refund RE WOLMAN, EUGENE B prorated RE	Contributor Type Occupation Type Description Street Address & Contributor Type Occupation Type Description YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 WOLMAN, EUGENE B prorated RE WOLMAN, EUGENE B prorated RE	Contributor Type Occupation Type Description Street Address & Contributor Type Occupation Type Description YNL LLC, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 PROFESSIONAL PLAN PROCESSING, 1519 CERTOSA AVENUE CORAL GABLES, FL 33146 B prorated refund RE Add Add WOLMAN, EUGENE B prorated RE Add Add Add Add Add Add Add

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name (2) I.D. Number								
	7/2/2022 7/1 	5/2022	l) Page <u>1</u>		0			
(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)	(11) Amount			
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