CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Francisco (Frank) Pichel	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1250834]								
(2)	Confidential Per F.S. 119.07	Submitted on:								
	Address (number and street)	10/30/2021 09:43:32 (eastern)								
	City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number: 72								
(4)	Check appropriate box(es):									
, ,	☐ Candidate Office Sought: Mayor									
	Political Committee (PC)									
	☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY)	Check here if PC or ECO has disbanded								
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)	•								
(5) Report Identifiers										
Cove		10 / 28 / 2021 Report Type: G03								
		ecial Election Report								
		<u> </u>								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	h & Checks \$, , <u>500</u> . <u>00</u>	Monetary								
Loar	s , , ,	Transfers to Office Account \$, , 0 . 00								
Total Monetary \$, , <u>500</u> . <u>00</u>		Total Monetary \$, 4 ,000 .00								
In-Ki	ind \$, , 0.00	, , , , , , , , , , , , , , , , , , , ,								
		(8) Other Distributions								
		\$, , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$								
(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:										
(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Francisco (Frank)	Pichel	(2) I.D. Numbe	er -	12
	10/16/2021 od///	1	.0/28/2021			
(5) Date (6) Sequence Number	(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)	(12)
10/17/2021	Claim Specialist Consulting, L, 757 NW 27 Avenue Suite 205 Miami, FL 33125	S self employed	СН			\$500.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Francisco	(Fra	ınk)	Pichel			 (2) I.D. Nun	nber	7	12	
	10/	16/2	021		10/28/	2021					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/17/2021	Claim Specialist Consulting, L, 757 NW 27 Aveneu	reimbursement to campaign of overpayment	МО		\$4,000.00
1	Suite 205 Miami, FL 33125				
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DS-DE 14 (Rev.	11/13 \			-)