

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Sosa  
Name

(2) 931 Hanford Dr.  
Address (number and street)

Deltona, FL 32738  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1256118]

Submitted on:  
3/3/2022 14:13:19 (eastern)

Check here if address has changed

(3) ID Number: 805

(4) Check appropriate box(es):

- Candidate Office Sought: County Council Member, District 5
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 2 / 1 / 2022 To 2 / 28 / 2022 Report Type: M2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 575 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 575 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 1 , 025 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 0 . 00

### (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) \_\_\_\_\_

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

X \_\_\_\_\_  
Signature

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name David Sosa (2) I.D. Number 805  
 (3) Cover Period 2/1/2022 through 2/28/2022 (4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type Occupation |            | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|---------------------------|--|---------------------------------------|------------|-----------------------------|--------------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  | Type                                  | Occupation |                             |                                |                   |                |
| 2/1/2022<br>/ /           | Tavernier, William<br>1880 N Merrick Dr<br>Deltona, FL 32738                                   | I                                     | retired    | CH                          |                                |                   | \$500.00       |
| 1                         |  |                                       |            |                             |                                |                   |                |
| 2/3/2022<br>/ /           | Eldridge, Mary<br>40 Carnation LN<br>Debary, FL 32713  | I                                     | retired    | CH                          |                                |                   | \$20.00        |
| 2                         |  |                                       |            |                             |                                |                   |                |
| 2/5/2022<br>/ /           | Whitman, Dayle<br>3234 Clewiston St<br>Deltona, FL 32738                                       | I                                     | retired    | CH                          |                                |                   | \$35.00        |
| 3                         |  |                                       |            |                             |                                |                   |                |
| 2/24/2022<br>/ /          | Handwerker, Steven<br>33 Laurel Ridge Break<br>Ormond Beach, FL 32174                          | I                                     | doctor     | CH                          |                                |                   | \$20.00        |
| 4                         |  |                                       |            |                             |                                |                   |                |
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name David Sosa

(2) I.D. Number 805

(3) Cover Period 2/1/2022 through 2/28/2022

(4) Page 1 of 0

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |  |                            |                   |                |
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