

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANGELICA PACHECO

Name

(2) 1571 W 76 ST

Address (number and street)

HIALEAH, FL 33014

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

(4) Check appropriate box(es):

Candidate Office Sought: CITY COUNCIL GROUP 6

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 10 / 02 / 21 To 10 / 15 / 21 Report Type: G2

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 170 . 00

Loans \$ _____ , 6 , 000 . 00

Total Monetary \$ _____ , 6 , 170 . 00

In-Kind \$ _____ , _____ , 24 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 7 , 169 . 94

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 32 , 540 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 31 , 911 . 47

(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 Angelica Pacheco (2) I.D. Number _____

(3) Cover Period 10/02/2021 / ____ / ____ through 10/15/2021 / ____ / ____ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
10/02/21 / /	MIGUEZ BODY SHOP 1550 W 84 ST HIALEAH, FL 33014						
56		B	BODY SHOP	CHE			150.00
10/04/21 / /	ANGELICA PACHECO 1571 W 76 ST HIALEAH, FL 33014						
57		S	NURSE	LOA			6000.00
10/13/21 / /	RAIMUNDO AVILA DE LA NOVAL 6090 W 18TH AVE APT 130 HIALEAH, FL 33012						
58		I	RETIRED	CHE			20.00
10/13/21 / /	RAIMUNDO AVILA DE LA NOVAL 6090 W 18TH AVE APT 130 HIALEAH, FL 33012						
59		I	RETIRED	INK	POSTAGE STAMP		24.00
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ANGELICA PACHECO

(2) I.D. Number _____

(3) Cover Period 10/2/21 / _____ / _____ through 10/15/21 / _____ / _____

(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
10/3/21 / / 043	US POSTMASTER 1700 NW 97TH AVE DORAL, FL 33172	POSTAGE	MON		3074.00
10/5/21 / / 044	BEST BUY 4001 W 20TH AVE HIALEAH, FL 33012	RADIO RAFFLE TV	MON		267.94
10/5/21 / / 045	LA PODEROSA 330 SW 27th AVE, 2nd Floor Miami, FL 33135	ADVERTISING	MON		2030.00
10/5/21 / / 046	LA PODEROSA 330 SW 27TH AVE MIAMI, FL 33135	ADVERTISING/INTERVIEW	MON		450.00
10/5/21 / / 047	LA PODEROSA 330 SW 27TH AVE MIAMI, FL 33135	ADVERTISING/EVENT	MON		1000.00
10/3/21 / / 048	PUBLIX 1290 W 68TH ST HIALEAH, FL 33014	POSTAGE	MON		348.00
/ /					
/ /					