

**FLORIDA DEPARTMENT OF STATE    DIVISION OF ELECTIONS**  
**CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Ernest N. Sochin  
**Name**

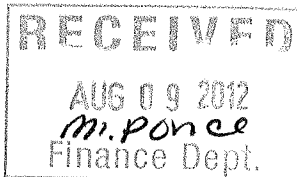
(2) 18730 SW 84 Court  
**Address (number and street)**

Cutler Bay, FL 33157

**City, State, Zip Code**

☐ **CHECK IF ADDRESS HAS CHANGED**

**OFFICE USE ONLY**



(3) ID Number: \_\_\_\_\_

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** \_\_\_\_\_

☐ **Political Committee**

☐ **Committee of Continuous Existence**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF PC HAS DISBANDED**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **CHECK IF NO OTHER ELECTIONEERING  
COMMUNICATION REPORTS WILL BE FILED**

**(5) REPORT IDENTIFIERS**

Cover Period: From 04 / 01 / 2012 To 06 / 30 / 2012 Report Type Q2

☒ **Original**    ☐ **Amendment**    ☐ **Special Election Report**    ☐ **Independent Expenditure Report**

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ 0.00

Loans    \$ 5,000.00

Total Monetary    \$ 5,000.00

In-Kind    \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary  
Expenditures    \$ \_\_\_\_\_

Transfers to Office  
Account    \$ \_\_\_\_\_

Total  
Monetary    \$ \_\_\_\_\_

**(8) Other Distributions**

\$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ 5,000.00

**(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) Theresa Esposito

☐ Individual (only for electioneering commun.)    ☒ **Treasurer**    ☐ **Deputy Treasurer**

**X** Theresa Esposito

**Signature**

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Ernest N. Sochin

☒ **Candidate**    ☐ **Chairperson (only for PC, PTY & electioneering commun. organization)**

**X** Ernest N. Sochin

**Signature**

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Ernest N. Sochin (2) I.D. Number \_\_\_\_\_

(3) Cover Period 04 / 01 / 2012 through 06 / 30 / 2012 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation				
07 / 09 / 2012	Sochin, Ernest N. 18730 SW 84 Court Cutler Bay FL 33157	I	Sales Manager	CHE LOA			\$5000.00
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