

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Manish Sood

Name

(2) 3765 E Rd

Address (number and street)

Loxahatchee Groves, FL, 33470

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Loxahatchee Groves Town Council Seat #5

☐ 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 / 01 / 2025 To 12 / 31 / 2025 Report Type: 2025Q4

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ 500 , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ 0 , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ 0 , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 500 , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ 0 , _____ , _____ . _____

(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) Manish Sood

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

X

Signature

(Type name) Manish Sood

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Manish Sood

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 2025 through 12 / 31 / 2025

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code						
1 / /	Manish Sood 3765 E RD Loxahatchee Groves, FL 33470	S		CAS			500
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 By: V. Gates

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Manish Sood

Name

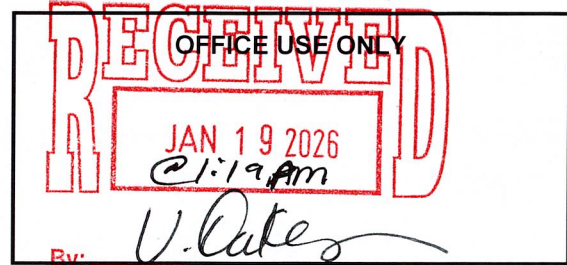
(2) 3765 E Rd

Address (number and street)

Loxahatchee Groves, FL, 33470

City, State, Zip Code

☐ Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Loxahatchee Groves Town Council Seat #5

☐ 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 / 01 / 2025 To 12 / 31 / 2025 Report Type: 2025Q4

☐ Original

☒ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ 500 , _____ . _____

Loans \$ _____ , _____ . _____

Total Monetary \$ _____ , _____ . _____

In-Kind \$ _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ 90 , _____ . _____

Transfers to Office Account \$ _____ , _____ . _____

Total Monetary \$ 90 , _____ . _____

(8) Other Distributions

\$ 0 , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 500 , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ 90 , _____ . _____

(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) Manish Sood

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

X

Signature

(Type name) Manish Sood

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

Instructions for Campaign Treasurer's Report Summary

- (1) **Name:** full name of the candidate, political committee, party executive committee, electioneering communications organization, or individual making an independent expenditure or electioneering communication.
- (2) **Address:** the full address or post office box, city, state, and zip code.
☐ Check the box if the address has changed since the last report filed.
- (3) **ID Number:** identification number assigned by the filing officer.
- (4) **Check the appropriate box(es).**
- (5) **Report Identifiers**
Cover Period: the dates this report covers (i.e., From 1/1/15 To 1/31/55). **Important:** use the appropriate cover period dates as published by the filing officer.
Report Type: refer to the filing officer's calendar of reporting dates for the correct codes to be used for each reporting period. If report is for a **special election** add "S" in front of the report code (i.e., SG3).
Check one of the appropriate boxes:
☐ Original: first report filed for this reporting period.
☐ Amendment: must summarize only contributions/fund transfers and expenditures/distributions being reported as additions or deletions. Read instructions for sequence numbers and amendment types on the back of Forms DS-DE 13A and 14A.
☐ Special Election Report: **Important:** once a special election report is filed, the entity is required to file all remaining reports due for the special election.
- (6) **Contributions This Report:**
Cash and Checks: total amount for this reporting period.
Loans: total amount for this reporting period.
Total Monetary: sum of Cash and Checks and Loans.
In-Kind: the fair market value of the in-kind contribution at the time it is given for this reporting period.
- (7) **Expenditures This Report:**
Monetary Expenditures: total amount of monetary expenditures for this reporting period.
Transfers to Office Account: total amount transferred to an office account by elected candidates only.
Total Monetary: sum of Monetary Expenditures and Transfers to Office Account.
- (8) **Other Distributions:** the total amount of goods and services contributed to a candidate or other committee by a PC, ECO, or PTY.
- (9) **TOTAL Monetary Contributions To Date:** the amount of total monetary contributions to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
- (10) **TOTAL Monetary Expenditures To Date:** the amount of total monetary expenditures to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
- (11) **Type or print the required officer's name and have them sign the report:**
☐ Candidate report: treasurer and candidate must sign.
☐ PC report: treasurer and chairperson must sign.
☐ PTY report: treasurer and chairperson must sign.
☐ ECO report: organization's treasurer must sign.
☐ IE or EC report: individual must sign (this applies when an individual acts alone to make these expenditures)

AMENDMENT REPORTS: An amendment report summary should summarize only contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94.

(1) Name Manish Sood (2) I.D. Number _____

(3) Cover Period 10 / 01 / 2025 through 12 / 31 / 2025 (4) Page 1 of 1

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES