(1) Demetrius Petron OFFICE USE ONLY								
OFFICE USE ONLY								
CITY CLERK								
24 JUN'24PM1:09:55								
CITY OF NORTH PORT								
(3) ID Number:								
(4) Check appropriate box(es):  Candidate Office Sought:  Poiltical 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								
rt Identifiers								
06114 124 Report Type: 2024 P1								
pecial Election Report								
(7) Expenditures This Report								
Monetary								
Transfers to Office Account \$ , , ,								
Total Monetary \$ , , <u>1S</u> . <u>OO</u>								
(8) Other Distributions								
\$,,								
(10) TOTAL Monetary Expenditures To Date \$,2,640.80								
rtification son to falsify a public record (ss. 839.13, F.S.)  rect, and complete:  (Type name) Demetrius Petros  (Type name) Chairperson (only for PC and PTY)   X Dentrius Petros  Signature								

CITY CLERK	
24 JUN'24PH1:10:04	
CITY OF MORTH PORT	

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Demetrios Pe	to	ı	(2	2) I.D. Number						
(1) Name <u>Devictorias Petron</u> (2) I.D. Number											
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)				
Sequence Number	Street Address & City, State, Zip Code	C Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount				
6,2,24	Demeters leton North Port FL 34236			LOA		ADD	\$795.21				
1 1											
1 1											
1 1											
1 1											
1 1											
, ,											

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK 24 JUN'24PM1:10:11 CITY OF NORTH PORT

(1) Name (2) I.D. Number							
(3) Cover Perio	d 6 / 1 / 24 through 6 /		4) Page		1		
(5) Date (6) Sequence Number	(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)	(11)		
6 /5/24	5/3 Bank 18120 Tamiami Thail Nonth Port, FL 34287	Checks	CAN	A 00	\$15		
//					N		
/ /					0		
/ /							
//							
_/_							
//							
//				9			