CAMPAIGN TREASURER'S REPORT SUMMARY				
(1) Denutras Petron	OFFICE USE ONLY			
Name	GITY CLERK			
	10 JUN'24PH3:24:08			
North Port FL 3425	CITY OF NORTH PORT			
City, State, Zip Code				
☐ Check here if address has changed	(3) ID Number:			
(4) Check appropriate box(es):				
Candidate Office Sought:	, , , , , , , , , , , , , , , , , , ,			
☐ 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			
Cover Period: From 4 1 1 1 24 To 5 131 124 Report Type: Q2				
☐ Original ☐ Amendment ☐ Spe	cial Election Report			
(6) Contributions This Report	(7) Expenditures This Report			
Cash & Checks \$, ,	Monetary Expenditures \$, ,			
Loans \$,, 50.00	Transfers to Office Account \$, , .			
Total Monetary \$, , <u>\$0</u> . <u>00</u>	Total Monetary \$,			
In-Kind \$, , .	,			
	(8) Other Distributions			
	\$, , ·			
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
\$, <u>50</u>	\$, , <u></u> , <u></u>			
(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)	(Type name)			
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)			
x Demeture Peterson	x			
Signature	Signature			

CITY CLERK

10 JUN'24PH3:24:14

CITY OF NORTH PORT

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Vernetrous Petron (2) I.D. Number							
(3) Cover Period / / / / / through 5 _ / 31 _ /_ 24 (4) Page of							
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
5, 24,24	Danterin	Load	1	Loan			50
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

- (1) Candidate's full name or name of the political committee (PC), electioneering communications organizations (ECO) or party executive committee (PTY).
- (2) The identification number assigned by the filing officer.
- (3) Cover period dates (e.g., <u>1/1/15</u> through <u>1/31/15</u>). (See filing officer's reporting dates calendar for appropriate year and cover periods.)
- (4) Page numbers (e.g., <u>1</u> of <u>3</u>).
- (5) Date contribution was RECEIVED (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

 For example, a M1 report having 75 contributions would use sequence numbers 1 through 75. The next report (M2), comprised of 40 contributions would use sequence numbers 1 through 40. Contributions on amended M1 reports would begin with sequence number 76 and on amended M2 reports would begin with
- (7) Type full name and address of contributor (including city, state and zip code).

sequence number 41. See the Amendment Type instructions below.

(8) Enter the type of contributor using one of the following codes: Occupation of contributor for contributions over \$100 only. (If a business, please indicate nature of business.)

	Individual	
В	Business	(also includes corporations, organizations, groups, etc.)
E	Electioneering Communications Organizations	
F	Political Committee	(federal or state)
Р	Political Parties	(includes federal, state and county executive committees)
0	Other	(e.g., candidate surplus funds to party, etc.)
S	Candidate to Self	

(9) Enter Contribution Type using one of the following codes:

NOTE: Cash includes cash and cashier's checks.

Code	Description
CAS	Cash or Cashier's Check
CHE	Check
COF	Carryover Funds from Previous Campaign
INK	In-Kind
INT	Interest
LOA	Loan
MO	Money Order
MUC	Multiple Uniform Contributions
RCT	Other Receipts
REF	Refund (Negative Amount Only)