

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Victor D. Dobrin

3. Address (include post office box or street, city, state, zip code)

20327 Reale Circle, Venice, FL 34293

4. Telephone

(734) 383 5132

5. E-mail address

dobrinvictor@gmail.com

6. Office sought (include district, circuit, group number)

City Commissioner, District Seat # 5

CITY OF NORTH PORT

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Michael E. Milak

11. Mailing Address

11697 Renaissance Blvd

12. Telephone

(941) 380 7248

13. City

Venice

14. County

Sarasota

15. State

FL

16. Zip Code

34293

17. E-mail address

mmilak33@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Chase Bank

20. Address

4203 S. Tamiami Trail

21. City

Venice

22. County

Sarasota

23. State

FL

24. Zip Code

34293

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

MAY 12, 2022

26. Signature of Candidate

Victor Dobrin

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, MICHAEL EDWARD MILAK, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

5/12/2022

Date

Michael E. Milak

Signature of Campaign Treasurer or Deputy Treasurer

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CITY OF NORTH PORT

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25. Date

MAY 16TH, 2022

26. Signature of Candidate

X Victor Dobrin

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, *VICTOR DOBRIN*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

MAY 16TH, 2022

Date

X

Victor Dobrin
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

CITY CLERK

16 MAY 22 AM 10:03:10

CITY OF NORTH PORT

I, Victor D. Dobrin,

candidate for the office of City of North Port Commission, District 5 ;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

Victor Dobrin

Signature of Candidate

5/16/2022

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).