	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	West Villagers for Responsible Government a/k/a W	V4RG OFFICE USE ONLY						
(0)	Name	CITY CLERK						
(2)	13149 Campanile Ct Address (number and street)	7 OCT'22pm1:20:37						
	Venice, FL 34293							
	City, State, Zip Code	CITY OF NORTH PORT						
	☐ Check here if address has changed	(3) ID Number: N/A						
(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						
	,							
		Identifiers						
Cov	er Period: From /	10 1 7 1 22 Report Type: 64						
	☐ Original ☐ Amendment ☐ Special Election Report							
(6)	Contributions This Report	(7) Expenditures This Report						
Cas	h & Checks \$, , <u>50</u> . <u>00</u>	Monetary Expenditures \$, 3_, 040. 20						
Loai	s , ,	Transfers to Office Account \$, , .						
Tota	Il Monetary \$, , <u>50</u> . <u>00</u>	Total Monetary \$, 3 , 040 · 20						
In-K	ind \$,							
		(8) Other Distributions						
		\$, , <u>Ø</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$ 113 , 482 . 63	\$, <u>79, 77936</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:								
(T	_{ype name)} Daniel DeJesus	(Type name) John E Meisel						
or	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х	Daniel De Jus	x						
S	ignature	Signature						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

7 OCT'22PH1:20:54

(1) Name West Villagers for Responsible Government a/k/a WV4RG (2) I.D. Number TY OF NORTH PORT										
(3) Cover Period 9 / 24 / 22 through 15 /) / 27 (4) Page of										
(5)	(7)		(8)	(9)	(10)	(11)	(12)			
Date	Full Name									
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Contributor		Comtaibudian	1					
Number	City, State, Zip Code	Туре	Occupation	Contribution Type	In-kind Description	Amendment	A			
10,7 22	Mc Mulen Julia 20350 CRANLAGODY	1	Сосиранол		Description	Alleidileit	Amount 50.00			
1 1	Jenice FL 34293									
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK 7 OCT'22PM1:21:05

CITY OF NORTH PORT

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name west villagers for Responsible Government a/k/a WV4RG (2) I.D. Number										
(3) Cover Period 9 124 122 through 1017 122 (4) Page of										
(5)	(7)	(8)	(9)	(10)	(11)					
Date	Full Name	Purpose								
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount					
	1:2-11 1/2 00									
10/7/22	2240 Religibles		Attorney		7					
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