

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) VICTOR DOBRIN
 Name

(2) 20327 REALE CIRCLE
 Address (number and street)
VENICE, FL 34293
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
 19 JUL '22 AM 10:09:12
 CITY OF NORTH PORT

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY OF NORTH PORT COMMISSION, DISTRICT 5
- 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

(5) Report Identifiers

Cover Period: From 07 / 02 / 2022 To 07 / 15 / 2022 Report Type: P3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 325 00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 325 00

In-Kind \$ _____ , _____ , 0 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 312. 97

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 312..97

(8) Other Distributions
 \$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date
 \$ _____ , _____ , 3, 690 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , _____ , 1, 788 . 94


(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) MICHAEL MILAK

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

X 
 Signature

(Type name) VICTOR DOBRIN

Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name VICTOR DOBRIN (2) I.D. Number _____

(3) Cover Period 0710212022 through 0711512022 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
0710512022 1	JEANNETTE MITROVICH 13174 FAMIGLIA VENICE, FL 34293	1	RETIRED	CAS			50
0710512022 2	BEN & JULIA SNEAD 13588 BRILLIATE VENICE, FL 34293	1	RETIRED	CHE			75
0711312022 3	STEVEN BOWITAN 18921 BIANCHI VENICE, FL 34293	1	RETIRED	CHE			50
0711412022 4	CHRISTINA KRUGER 12225 CANAVESE LN VENICE, FL 34293	1	RETIRED	CHE			150
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name VICTOR DOBRIN (2) I.D. Number _____

(3) Cover Period 07/02/22 through 07/15/22 (4) Page 1 of 1

(5) Date	(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) Amendment	(11) Amount
07/07/22 1	PRINT PLACE 1130 AVE ARLINGTON, TX 76011	CARD FLYERS	MON		308.14
07/15/22 2	PAYPAL 2911 N 1ST ST. SAN JOSE, CA 95131	TRANSACTION CONTRIBUTION	MON		4.83
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					