

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
 26 JUL '22 PM 4:05:41
 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)

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

(5) Report Identifiers

Cover Period: From 07 / 16 / 2022 To 07 / 22 / 2022 Report Type: P4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 250 .00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 250.00

In-Kind \$ _____ , _____ , 0 .00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0 .00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0.00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 3, 940 .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 *Victor Dobrin*
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 07/16/22 through 07/22/22 (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
07/16/22	TONIA PORADA 20590 GRAN LAGO VENICE, FL 34293	1	RETIRED	CHE			50
1							
07/16/22	KEVIN SZOPINSKI 20299 GRAN LAGO VENICE, FL 34293	1	RETIRED	CHE			50
2							
07/16/22	JEFFREY SCOTT 2634 TWINKLE NORTH PORT FL 34286	1	RETIRED	CHE			50
3							
07/22/22	AYDA & JOSEPH THOLL 20610 GRAN LAGO VENICE, FL 34293	1	RETIRED	CHE			100
4							
1							
1							
1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name VICTOR DORBIN

(2) I.D. Number _____

(3) Cover Period 07, 16, 22 through 07, 22, 12

(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
1 / 1	No Expenditures for P4				
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					