

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANDREW SIAS
Name

(2) 2548 Oracle Lane
Address (number and street)

North Port FL 34286
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK

10 JAN 24 PM 3:21:47
CITY OF NORTH PORT

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City Commissioner # 3

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 10 / 1 / 23 To 12 / 31 / 23 Report Type: 04 2023

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , 0 , 0 . 0

Loans \$ 0 , 0 , 0 . 0

Total Monetary \$ 0 , 0 , 0 . 0

In-Kind \$ ~~0~~ , 1,000.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ 348 . 71

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

Total Monetary \$ _____ , _____ 348 . 71

(8) Other Distributions

\$ _____ , _____ , 0 . _____

(9) TOTAL Monetary Contributions To Date

\$ ~~0~~ , 2,037 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 348 . 71

(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) Robert Sossan

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

[Signature]
Signature

(Type name) ANDREW F. SIAS

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CITY OF NORTH PORT
CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Andrew Jias (2) I.D. Number _____
 (3) Cover Period 10, 1, 23 through 12, 31, 23 (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
11/30/23	Parusetta Parady North Port FL City of North Port	Parady Fee	Public Event		30.00
12/05/23	Venice Print Center 26215 Tamiami Venice FL 33596	Stickers Sign for float NAMETAGS	Promotional + Political Signage		318.12
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

10 JAN 24 PM 5:22:06

(1) Name Andrew F. Sias

(2) I.D. Number _____

(3) Cover Period 10 / 1 / 23 through 12 / 31 / 23 (4) Page _____ of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
12, 21, 23	Scott Heinis		IT Tech		Web page Mailbox		1,000.00
/ /							
/ /							
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/ /							