

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Michael Ivankovic  
 Name  
 (2) 18247 Hottellet Cir  
 Address (number and street)  
Port Charlotte, FL 33948  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1067656]

Submitted on:  
 7/10/2014 14:03:34 (eastern)

Check here if address has changed

(3) ID Number: 407

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner District 4
- 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 6 / 21 / 2014 To 7 / 4 / 2014 Report Type: P2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,   2   , 650 . 00

Loans \$      ,      ,   0   . 00

Total Monetary \$      ,   2   , 650 . 00

In-Kind \$      ,      ,   0   . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      ,   0   . 00

Transfers to Office Account \$      ,      ,   0   . 00

Total Monetary \$      ,      ,   0   . 00

### (8) Other Distributions

\$      ,      ,   0   . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,   21   , 971 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,   8   , 105 . 01

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

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name David Michael Ivankovic (2) I.D. Number 407  
 6/21/2014 through 7/4/2014  
 (3) Cover Period / / through / / (4) Page 1 of 2

(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						
6/23/2014 / /	SUNCOAST MGMT SVS, 18131 BRODETTE AVE PORT CHARLOTTE, FL 33954	B mgmt company	CH			\$25.00
1						
6/25/2014 / /	FIVE STAR REALTY OF CHAR CO, 1203 W. MARION AVE PUNTA GORDA, FL 33950	B realty	CH			\$500.00
2						
6/24/2014 / /	SANDSTAR HOMES, LLC, 1203 W. MARION AVE. PUNTA GORDA, FL 33950	B constructi on co	CH			\$500.00
3						
6/24/2014 / /	FIVE STAR GENERAL CONTRACTING,, 1203 W. MARION AVE. PUNTA GORDA, FL 33950	B constructi on co	CH			\$500.00
4						
6/24/2014 / /	C. MICHAEL POLK & ASSOCIATES, , P.O. BOX 510215 PUNTA GORDA, FL 33951	B appraisal co	CH			\$200.00
5						
6/24/2014 / /	MOONEY, MARILYN SMITH 654 ANDROS CT. PUNTA GORDA, FL 33950	I retired	CH			\$250.00
6						
6/24/2014 / /	DESGUIN, TERESA L 413 W. GRACE ST. PUNTA GORDA, FL 33950	I	CH			\$50.00
7						
6/24/2014 / /	LOFTUS, RICHARD D 4519 HERDER ST. PORT CHARLOTTE, FL 33948	I retired	CH			\$50.00
8						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name David Michael Ivankovic (2) I.D. Number 407  
 (3) Cover Period 6/21/2014 through 7/4/2014 (4) Page 2 of 2

(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				
6/24/2014 / /	COUNSIL, CHARLES A. 3721 ALBACETE CIR. PUNTA GORDA, FL 33950	I	retired	CH			\$25.00
9							
6/24/2014 / /	FOLCHI, LORRAINE 1456 SEA FAN DRIVE PUNTA GORDA, FL 33950	I	retired	CA			\$50.00
10							
6/27/2014 / /	LAISHLEY MARINE, INC., 3415 TAMIAAMI TRAIL PUNTA GORDA, FL 33950	B	retail store	CH			\$500.00
11							
/ /							
/ /							
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/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name David Michael Ivankovic

(2) I.D. Number 407

(3) Cover Period 6/21/2014 through 7/4/2014

(4) Page 1 of 0

(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
(6) Sequence Number					
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