

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Rolin Dorsainvil  
Name

(2) 6224 Spring Lake Ter  
Address (number and street)

Fort Pierce, FL 34951  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1228949]

Submitted on:  
9/2/2020 11:20:08 (eastern)

Check here if address has changed

(3) ID Number: 430

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner, District 1
- 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 8 / 14 / 2020 To 8 / 21 / 2020 Report Type: G1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 460 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 150 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 150 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 11 , 470 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 10 , 276 . 07

### (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 Rolin Dorsainvil (2) I.D. Number 430  
 8/14/2020 through 8/21/2020  
 (3) Cover Period      /      /      through      /      /      (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
8/18/2020 / /	DORSAINVIL, SOLANGE I 6224 SPRING LAKE TER FORT PIERCE, FL 34951	I	county worker	IK	refreshmen t and food for poll workers		\$320.00
1							
8/16/2020 / /	Dantilus, Jean R 854 SE PROCTOR LN Port Saint Lucie, FL 34983	I	insurance agent	IK	head quater office utilities payment.		\$140.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Rolin Dorsainvil

(2) I.D. Number 430

(3) Cover Period 8/14/2020 through 8/21/2020

(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
(6) Sequence Number					
8/18/2020 //	SWOOPE, JEWAKETESHIA WINTER PARK FORT PIERCE, FL 34951	election day poller	MO		\$150.00
1					
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