

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
 [1209338]

Submitted on:
 6/9/2020 15:03:39 (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 5 / 1 / 2020 To 5 / 31 / 2020 Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 100 . 00

Loans \$, 8 , 000 . 00

Total Monetary \$, 8 , 100 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 4 , 858 . 14

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 4 , 858 . 14

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 9 , 120 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 7 , 106 . 55

(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
 5/1/2020 through 5/31/2020
 (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 Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
5/17/2020 / /	DORSAINVIL, SOLANGE I 6224 SPRING LAKE TER FORT PIERCE, FL 34951	I	sheriff deputy	CH			\$100.00
1							
5/17/2020 / /	DORSAINVIL, ROLIN I 6224 SPRING LAKE TER FORT PIERCE, FL 34951	S	general contractor	LO			\$7,000.00
2							
5/23/2020 / /	DORSAINVIL, ROLIN I 6224 SPRING LAKE TER FORT PIERCE, FL 34951	S	general contractor	LO			\$1,000.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Rolin Dorsainvil

(2) I.D. Number 430

(3) Cover Period 5/1/2020 through 5/31/2020

(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					
5/28/2020 //	SUPERVISOR OF ELECTION, 4132 OKEECHOBEE RD FORT PIERCE, FL 34947	qualifying fee	MO		\$4,858.14
1					
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