

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Douglas Mark DeRosa  
Name

(2) 3143 S Indian River Dr  
Address (number and street)

Fort Pierce, FL 34982  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1296776]

Submitted on:  
5/31/2023 16:54:23 (eastern)

Check here if address has changed

(3) ID Number: 551

(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 4 / 1 / 2023 To 6 / 30 / 2023 Report Type: TRb

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        , 25 , 000 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        , 25 , 000 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 25 , 000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 25 , 000 . 00

### (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 Douglas Mark DeRosa (2) I.D. Number 551

4/1/2023 through 6/30/2023

(3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 1 of 0

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type      Occupation |  | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-------------|--|--|--|-----------------------------|--------------------------------|-------------------|----------------|
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |
| /      /    |  |  |  |                             |                                |                   |                |

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Douglas Mark DeRosa

(2) I.D. Number 551

(3) Cover Period 4/1/2023 through 6/30/2023

(4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate)              | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|---|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |   |                            |                   |                |
| 4/6/2023<br>//            | Derosa, Mark<br>3143 S Indian River Dr<br>Fort Pierce, FL 34982                                | reimbursement<br>for payment to<br>good help<br>group, llc for<br>logo, web<br>domains, | MO                         |                   | \$1,415.12     |
| 1                         |  |   |                            |                   |                |
| 4/6/2023<br>//            | Derosa, Mark<br>3143 S Indian River Dr<br>Fort Pierce, FL 34982                                | repayment<br>of loan.   | RM                         |                   | \$23,584.88    |
| 2                         |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |
| //                        |  |   |                            |                   |                |