CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Christopher Paul Dzadovsky	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	1002 Jamaica Ave	Submitted on:					
	Address (number and street)	Submitted on: 10/3/2023 12:27:50 (eastern)					
	Fort Pierce, FL 34982						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 623					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: County Commission	sioner, District 1					
	Political Committee (PC)	□ 01 - 1 1- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		<ul><li>☐ Check here if PC or ECO has disbanded</li><li>☐ Check here if PTY has disbanded</li></ul>					
	•	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)	-					
	(5) Para et	11 40					
_	.,,	dentifiers					
Cove	er Period: From 7 / 1 / 2023 To	9 / 30 / 2023 Report Type: Q3					
X O	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Cash	h & Checks \$ , 1 , 200 . 00	Expenditures \$ , , 0 . 00					
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to					
		Office Account \$ , , , 0 . 00					
Tota	Il Monetary \$ ,1 , <u>200</u> . <u>00</u>						
		Total Monetary \$ , , 0 . 00					
In-Ki	ind \$,,000						
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(-,	\$, 6 , 200 . 00	\$ , , 0.00					
	(11) Cert						
	It is a first degree misdemeanor for any person	on 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:							
(T <sup>,</sup>	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
	electioneering comm.)						
х		v					
	gnature	X Signature					

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Christopher Paul Dzadovsky				(2) I.D. Number		623	
	7/1/2023 iod///		c	/30/2023	(4) Pag			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount	
8/10/2023 / /	Vol Fund, IBEW PAC 900 Seventh St NW Washington , D. 20001	F	pac	СН			\$1,000.0	
8/10/2023 / / 2	Hensley, Kathryn 117 NE Surfside Ave Port St. Lucie, FL 34983	I	retired	СН			\$200.0	
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207	copher Paul Dzadovsky		D EXPENDITURES 2) I.D. Number		623
3) Cover Period _	7/1/2023 9/ /through	30/2023 _//(4	l) Page <u>1</u>	of _	0
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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