

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) VICTOR P. DEBIANCA JR  
Name

(2) 936 S. SouthLAGE DR.  
Address (number and street)

HOLYWOOD FL 33019  
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: CITY COMMISSION DISTRICT 1
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 10 / 22 / 2016 To 11 / 03 / 2016 Report Type: 201667

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 260 . 00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 260 . 00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 00

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 00

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 00

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 130 , 156 . 50

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 13 , 856 . 24

### (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) VICTOR P. DEBIANCA JR

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

X [Signature]  
Signature

(Type name) VICTOR P. DEBIANCA JR

Candidate  Chairperson (only for PC and PTY)

X [Signature]  
Signature

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

(1) Name VICTOR P. DEB, ANCM (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 22 / 2016 through 11 / 03 / 2016 (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
11 / 03 / 16	ELIZABETH MCKENZIE STUART 905 SW 4 <sup>TH</sup> TERR APT B HALLANDALE BEACH FL 33009	I	BANKER	CHE		ADD	10-
1							
11 / 03 / 16	JAMES L. McLumber 1600 DANSON ST HOLLYWOOD FL 33020	I	BUSINESS OWNER	CHE		ADD	250-
2							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							