

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Betty Gelzer
 Name

(2) 815 Hills Street
 Address (number and street)

Orlando, FL 32805
 City, State, Zip Code

OFFICE USE ONLY

ORL. CITY CLERK
 JUN 12 2017 9:41:20 AM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Orlando City Commissioner, District 5

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 05 / 01 / 2017 To 05 / 31 / 2017 Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 500.00

Loans \$ _____ , 1,150.00

Total Monetary \$ _____ , 1,650.00

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0.00

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 0.00

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 8,673.50

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1,190.53

(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:

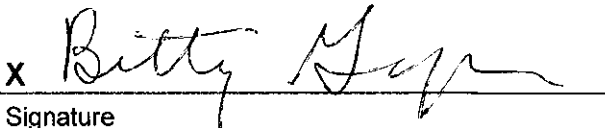
(Type name) Lawanna Gelzer

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

X 
 Signature

(Type name) Betty Gelzer

Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Betty Gelzer (2) I.D. Number _____

(3) Cover Period 05 / 01 / 2017 through 05 / 31 / 2017 (4) Page 1 of 2

(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	Type	Description	Amendment	Amount
05 / 15 / 17 C-5001	Peabo Child Care Center 815 Hills Street Orlando, FL 32805	B	Child Care	CHE			500.00
05 / 20 / 17 C-5002	Betty Gelzer 825 West Washington St Orlando, FL 32805	I	Child Care	LOA			1150.00
05 / 31 / 17 C-5003	Tice, Henrietta 4334 Clarinda Street Orlando, FL 32811	I	Retired	REF		ADD	-358.00
05 / 31 / 17 C-5004	Tice, Henrietta 4334 Clarinda Street Orlando, FL 32811	I	Retired	MO		ADD	358.00
05 / 31 / 17 C-5005	Tice, Henrietta 4334 Clarinda Street Orlando, FL 32811	I	Retired	REF		ADD	-126.00
05 / 31 / 17 C-5006	Tice, Henrietta 4334 Clarinda Street Orlando, FL 32811	I	Retired	MO		ADD	126.00
05 / 31 / 17 C-5007	AAA Alliance 7674 St.Stephens Ct Orlando, FL 32835	B	Orangization	REF		ADD	-631.50

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Betty Gelzer (2) I.D. Number _____

(3) Cover Period 05 / 01 / 2017 through 05 / 31 / 2017 (4) Page 2 of 2

(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
05 / 31 / 17 C-5008	AAA Alliance 7674 St. Stephens Ct Orlando, FL 32835	B	Orangization	MO		ADD	631.50
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