CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Charles Fetzer II	OFFICE USE ONLY						
Name	ONLINE SUBMISSION						
(2) https://votefetzer.com; 1810 Imeson H	Rd. Submitted on:						
Address (number and street) Jacksonville, FL 32220	6/15/2019 15:42:00 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 896						
(4) Check appropriate box(es):							
<ul> <li>City Council District 10</li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>Check here if PTY has disbanded</li> <li>Check here if no other IE or EC reports will be filed</li> </ul>							
(5) Report Identifiers							
Cover Period: From <u>3</u> / <u>15</u> / <u>2019</u> T	o <u>6</u> / <u>17</u> / <u>2019</u> Report Type: <u>TRF</u>						
☐ Original	pecial Election Report						
(6) Contributions This Report (7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , , 0 . 00						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,,0						
Total Monetary       \$	Total Monetary \$ , , , 0 . 00						
······································	(8) Other Distributions						
	\$,, 00						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>7</u> _, <u>499</u> . <u>29</u>	\$, <u>7</u> , <u>370</u> . <u>81</u>						
(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)	(Type name)						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
_X	x						
Signature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	<u>Charles Fetzer II</u>	(2) I.D. Number					96	
3/15/2019			6	6/17/2019				
(3) Cover Perio	od / /	thro	ough	<i>II</i>	(4) Page	e	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
	160 %	. 0 X	2	3-312				
1 1								
1 1	-							
1 1	-							
1 1								
1 1								
1 1								
1 1								
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Char	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES         Les Fetzer II       (2) I.D. Number							
(3) Cover Period	3/15/2019 6/ d/ _/through	17/2019 _//(4	4) Page <u>1</u>	of	1			
(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			
	Fetzer, Charles E 1810 imeson rd Jacksonville, FL 32220	repayment of candidate loan	DI		\$199.05			
1								
_/ /								
_/ /								
_/_/								
11								
//								

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