

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kelly Semrad

Name

(2) 3111 Amalfi Dr.

Address (number and street)

Orlando, FL 32820

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 1178

(4) Check appropriate box(es):

☒ Candidate Office Sought: County Commissioner District 5

☐ 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

OFFICE USE ONLY
ONLINE SUBMISSION
[1324550]

Submitted on:
8/9/2024 23:57:18 (eastern)

(5) Report Identifiers

Cover Period: From 7 / 27 / 2024 To 8 / 2 / 2024 Report Type: P6

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 705 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 705 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 51 , 323 . 22

(10) TOTAL Monetary Expenditures To Date

\$, 27 , 248 . 51

(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 Kelly Semrad (2) I.D. Number 1178
 7/27/2024 8/2/2024
 (3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (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
7/27/2024 / /	Martin, Eric 1067 Drift Creek Cove Orlando, FL 32828	I substitute teacher	CH			\$20.00
1						
7/27/2024 / /	Rose, Shaniqua 734 Short Ave Orlando, FL 32805	I nonprofit management	CH			\$100.00
2						
7/27/2024 / /	Cox, Carla 3585 highway 524 303 Coco, FL 32926	I directorchristianservicecenter	CH			\$25.00
3						
7/27/2024 / /	Portelli, Lisa 1421 Magnolia Ave Winter Park, FL 32789	I orlandocityadvisorhomelessness	CH			\$25.00
4						
7/27/2024 / /	Lott, Anne 10824 Glen Cove Cir Apt 204 Orlando, FL 32817	I financialservicesprofession	CH			\$50.00
5						
7/27/2024 / /	Yoakum, Nina ***Protected Voter***	I not employed	CH			\$100.00
6						
7/28/2024 / /	Dontrich, John 750 North Orange Ave 4311 Orlando, FL 32801	I proprietor	CH			\$25.00
7						
7/29/2024 / /	Valente, Andrew 919 Golfview St Orlando, FL 32804	I architect	CH			\$100.00
8						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Kelly Semrad (2) I.D. Number 1178
 7/27/2024 8/2/2024
 (3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (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
7/29/2024 / /	Edge, Hoyt 527 Henkel Circle Winter Park, FL 32789	I	not employed	CH			\$50.00
9							
7/29/2024 / /	Eagan, Rebecca 1311 Palmer Ave. Winter Park, FL 32789	I	artist	CH			\$50.00
10							
7/29/2024 / /	Cannon, Jill 4773 Dunbarton Drive Orlando, FL 32817	I	not employed	CH			\$50.00
11							
7/29/2024 / /	Pereira Bonilla, Ramon 8758 Hastings Beach Blvd Orlando, FL 32829	I	business analyst	CH			\$100.00
12							
7/30/2024 / /	Harlyinking, Joy 186 Longview Ave Celebration, FL 34747-5039	I	mentalhealth counselor	CH			\$10.00
13							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kelly Semrad

(2) I.D. Number 1178

(3) Cover Period 7/27/2024 through 8/2/2024

(4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
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