

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kelly Semrad
 Name
 (2) 3111 Amalfi Dr.
 Address (number and street)
Orlando, FL 32820
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1302859]

Submitted on:
 1/10/2024 22:17:33 (eastern)

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) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 10 / 1 / 2023 To 12 / 31 / 2023 Report Type: Q4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 63 . 11

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 63 . 11

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 11 , 566 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 6 , 323 . 03

(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

10/1/2023 through 12/31/2023

(3) Cover Period ___ / ___ / ___ through ___ / ___ / ___ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kelly Semrad

(2) I.D. Number 1178

(3) Cover Period 10/1/2023 through 12/31/2023

(4) Page 1 of 1

(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
(6) Sequence Number					
11/1/2023 / /	ActBlue, 366 Summer Street Somerville, MA 02144	fees	MO	Add	\$52.90
1					
12/1/2023 / /	ActBlue, 366 Summer Street Somerville, MA 02144	fees	MO	Add	\$10.21
2					
/ /					
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