CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Lawanna Gelzer	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	815 Hills St.	Submitted on:						
	Address (number and street)	8/3/2022 21:57:46 (eastern)						
	Orlando, FL 32805 City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 1112						
(4)	Check appropriate box(es):							
۱۰,	☐ Candidate Office Sought: County Commit	ssioner 6						
	Political Committee (PC)							
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
	☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	 ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 						
	individual making electioneering communications)							
	(5) Repor	t Identifiers						
Cove	er Period: From 7 / 16 / 2022 To							
		pecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
(-)	Communication and Report	Monetary						
Cash	n & Checks \$, , 0 . 00	Expenditures \$,1 , 670 . 95						
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Tota	I Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00						
Tota	,,,	Total Monetary \$, 1 ,670 .95						
In-Ki	nd \$, , 0.00	,, ,, ,, ,						
	,, ,, ,,	(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(5)	\$, 61 , 275 . 00	\$,29,17156						
		,, ,, ,, ,, ,,						
(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:								
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х	x x							
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawanna Gelzer (2) I.D. Number 1112							
	7/16/2022		7	/22/2022			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e <u>1</u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1							
1 1							
J J							
1 1							
1 1							
1 1							
/ /							
, ,							

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Lawann	a Gelze	er			100	(2	2) I.D. Nun	nber	-	1112	-
		7/16/2	022		7/22/20)22		•	-			
(3) Cover P	eriod	I	1	through	1	1	(4	l) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
7/22/2022	CopyFax Orlando, Copy 3455 WD Judge Drive, Suite 130	printing	MO		\$1,670.95
1	Orlando, FL 32808				
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