CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Anjali Vaya	OFFICE USE ONLY						
Name (2) 1717 Pine Ave.; �	ONLINE SUBMISSION [1209205]						
(2) <u>1717 Pine Ave.; i;½</u> Address (number and street)	Submitted on:						
Winter Park, FL 32789	6/9/2020 09:51:13 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 143						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>County Commissioner 5</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an 							
individual making electioneering communications)							
(5) Report Identifiers							
Cover Period: From <u>5</u> / <u>1</u> / <u>2020</u> To	5 / 31 / 2020 Report Type: M5						
🗌 Original 🛛 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$, , , 00						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,0.00						
Total Monetary \$	Total Monetary \$, , , , 00						
	(8) Other Distributions						
	\$,,,						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>105</u> , <u>432</u> . <u>00</u>	\$, <u>33</u> , <u>219</u> . <u>31</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						

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number					
5/1/2020			5	/31/2020		_			
(3) Cover Perio	od / /	thro	bugh	I I	(4) Page	e	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	Co	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1 1									
1									
1 1									
1 1	-								
1 1	-								
1 1	-								
1 1	_								
/ /									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Anja	CAMPAIGN TREASURER'S F li Vaya	(2		EXPENDITURES	
	5/1/2020 5/ / through	/31/2020	4) Page <u>1</u>	of	1
(5) Date (6) Sequence Number	(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
	<pre>supervisor of elections, 119 West Kaley Street orlando, fl 32806</pre>	petitions	МО	Add	\$90.00
_/ /					
//					
_/ /					
_/ /					
_/ /					
_/ _/					
11					

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES