

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Cheryl Grieb  
 Name  
 (2) 612 Lakeshore Blvd  
 Address (number and street)  
Kissimmee, FL 34744  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1249939]

Submitted on:  
 10/7/2021 14:13:15 (eastern)

Check here if address has changed

(3) ID Number: 488

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner District 4
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 9 / 1 / 2021 To 9 / 30 / 2021 Report Type: M9

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,   2   , 000 . 00

Loans \$      ,      ,   0   . 00

Total Monetary \$      ,   2   , 000 . 00

In-Kind \$      ,      ,   0   . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      ,   23   . 30

Transfers to Office Account \$      ,      ,   0   . 00

Total Monetary \$      ,      ,   23   . 30

### (8) Other Distributions

\$      ,      ,   0   . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,   2   , 000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      ,   23   . 30

### (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 Cheryl Grieb (2) I.D. Number 488

(3) Cover Period 9/1/2021 through 9/30/2021 (4) Page 1 of 1

(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
(6) Sequence Number		Type	Occupation				
9/10/2021 / /	Grieb, Cheryl 612 Lakeshore Blvd Kissimmee, FL 34744	S	realtor/co mmissioner	CH			\$1,000.00
1							
9/16/2021 / /	Bryan, Christopher Scott 1815 Big Oak Lane Kissimmee, FL 34746	I	tour operator owner	CH			\$1,000.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Cheryl Grieb

(2) I.D. Number 488

(3) Cover Period 9/1/2021 through 9/30/2021

(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					
9/22/2021 / /	Harland Clarke, 15955 La Cantera Parkway San Antonio, TX 78256	checks	MO		\$23.30
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					