	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Noel Ortiz	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	PO Box 452131	Submitted on:						
	Address (number and street)	6/2/2023 15:28:31 (eastern)						
	Kissimmee, FL 34745							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:595						
(4)	Check appropriate box(es):							
	X Candidate Office Sought: Kissimmee City Commission Seat 1							
	Political Committee (PC)	□ 01 = 1 been 15 00 = 2 500 been dishearded						
		<ul><li>☐ Check here if PC or ECO has disbanded</li><li>☐ Check here if PTY has disbanded</li></ul>						
	•	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) D							
		dentifiers						
Cove	er Period: From $5 / 1 / 2023$ To	5 / 31 / 2023 Report Type: <u>M5</u>						
X O	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$ , 2 , 400 . 06	Expenditures \$ , , _0 . 00						
Loar								
	Office Account \$ , , , 0 . 00							
Tota	otal Monetary \$,,							
	100 50	Total Monetary \$ , , 0 . 00						
In-Ki	ind \$, <u>188</u> . <u>50</u>							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(0)	\$,2_, _45006	\$ , , 0 . 00						
	,,,	,, <u></u>						
	(11) Cert							
	It is a first degree misdemeanor for any person	on to falsify a public record (ss. 839.13, F.S.)						
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:						
(T	ype name)	(Type name)						
	Individual (only for IE Treasurer Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)						
	electioneering comm.)							
v		V.						
<u>X</u>	gnature	X Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) NameNoe	(2) I.D. Number				595				
	5/1/2023	3		5/31/	2023				
(3) Cover Period	1	1	through	1	1	(A) Page	1	of	1

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(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)		1.11	O 171 17	Inco Internal		
Sequence Number	Street Address & City, State, Zip Code	5.00	ontributor Occupation	Contribution	In-kind Description	Amendment	Amount
Number	The Real Estate	Type B	real	Type CH	Description	Amendment	\$200.00
5/9/2023	Gallery, 120 BROADWAY		estate brokerage	CII			Ψ200.00
1	Suite 201 KISSIMMEE, FL 34741						
5/9/2023	Adanse Dance, 19 Broadway KISSIMMEE, FL 34741	I	business	СН			\$50.00
2							
5/9/2023	Primerica Life Insurance Co, 103 E Monument Ave Kissimmee, Fl 34741	В	insurance broker	СН			\$500.00
3							
5/9/2023	Homs PA, Fernando 4601 Neptune Road Saint Cloud, Fl 34769	В	re brokerage	СН			\$500.00
4							
5/31/2023 / /	Soto, Yolanda 4001 Beau Rivage Court Kissimmee, Fl 34746	I	agent	СН			\$150.00
F /21 /2022	Mouriz, Miguel A	I	broker	СН			\$1,000.00
5/31/2023	916 West Bryan Street Kissimmee, Fl 34741						
6							
5/31/2023 / /	SouthState Bank, Oak Street Kissimmee, Fl 34741	В	interest	IN			\$0.00
7							
5/31/2023	Culturas Catering, 2175 Continental Ave Saint Cloud, Fl 33769	В	catering	IK	catering services for campaign meeting		\$188.50
8					mecering		

Name Noel (	5/1/2023	5,	(2) I.D. Numbe	-		
Cover Period _	<u> </u>	through		(4) Page1	of	0
(5) Date  (6) Sequence Number	(7 Full N (Last, Suffix, Street Ac City, State	lame First, Middle) Idress &	(8) Purpose (add office sought contribution to a candidate)		(10)	(11) Amount
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