

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Nancy Schleicher

Name

(2) 1460 Baton Dr.

Address (number and street)

Deltona, FL. 32725

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

16-10-24 16:22 RCVD *kg*

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Deltona City Commission District 4

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10 / 01 / 16 To 10 / 07 / 16 Report Type: G4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 500. 00

Loans \$ _____ , _____ , 0

Total Monetary \$ _____ , _____ , 500. 00

In-Kind \$ _____ , _____ , 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . 0

Transfers to Office Account \$ _____ , _____ , _____ . 0

Total Monetary \$ _____ , _____ , _____ . 0

(8) Other Distributions

\$ _____ , _____ , 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , 9 , 510 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 5 , 264 . 64

(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) Nancy Schleicher

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X *Nancy Schleicher*
Signature

(Type name) Nancy L. Schleicher

Candidate Chairperson (only for PC and PTY)

X *Nancy L. Schleicher*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Nancy Schleicher (2) I.D. Number _____

(3) Cover Period 10 / 01 / 16 through 10 / 07 / 16 (4) Page 1 of 1

(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		
10 / 3 / 16 1	DeMarsh, Frank 2209 Oak Hill Dr DeLand, FL 32720	I	Business <i>owner</i>	CHE			250.00
10 / 3 / 16 2	DeMarsh, C.Clint PO Box 2076 DeLand, FL.32721	I	Business <i>owner</i>	CHE			250.00
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