

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Nancy Schleicher
 Name
 (2) 1460 Baton Dr.
 Address (number and street)
Deltona, FL 32725
 City, State, Zip Code

OFFICE USE ONLY

16-11-07 10:51 RCVD *JK*

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Deltona City Commission 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 10 / 22 / 16 To 11 / 03 / 16 Report Type: G6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 286. 00

Loans \$ _____ , _____ , 0

Total Monetary \$ _____ , _____ , 286. 00

In-Kind \$ _____ , _____ , 173. 23

(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 , 932 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 8 , 376 . 39

(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 / 22 / 16 through 11 / 03 / 16 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
10 / 24 / 16 1	Wyche, Keith protected	I	firefighter	MO			10.00
10 / 24 / 16 2	Paulk, Tanya M protected	I	firefighter	MO			10.00
10 / 24 / 16 3	Nazario, Jose protected	I	firefighter	CHE			10.00
10 / 24 / 16 4	Sabia, John protected	I	firefighter	CHE			20.00
10 / 24 / 16 5	Schleicher, Nancy 1460 Baton Dr. Deltona, FL. 32725	S	retired	INK	food/water <i>for safety</i> <i>Volunteers</i>		120.00
10 / 25 / 16 6	Perkins, Benjamin 487 E. Lehigh Deltona, FL 32738	I					100.00
10 / 27 / 16 7	Jaacinto, Anthony Protected	I	firefighter	CHE			10.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Nancy Schleicher

(2) I.D. Number _____

(3) Cover Period 10 / 22 / 16 through 11 / 03 / 16

(4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11)	(12)
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
11 / 03 / 16	Florida Fire-PAC 343 W. Madison St Tallahassee, FL 32301	F		CHE			126.00
8							
10 / 27 / 16	John Viccaro Protected	I	firefighter	INK	Business Cards		53.23
9							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Nancy Schleicher

(2) I.D. Number _____

(3) Cover Period 10 / 22 / 16 through 11 / 03 / 16

(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					
/ /	none				
/ /					
/ /					
/ /					
/ /					
/ /					