

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Elliott Dorsch  
Name

(2) 1845 E MEMORIAL BLVD  
Address (number and street)

LAKELAND, FL 33801  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_



(4) Check appropriate box(es):

Candidate (office sought): CITY COMMISSION NE DISTRICT

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 11 / 04 / 2011 To 02 / 06 / 2012 Report Type TR

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ \_\_\_\_\_ 0.00

Loans    \$ \_\_\_\_\_ 0.00

Total Monetary    \$ \_\_\_\_\_ 0.00

In-Kind    \$ \_\_\_\_\_ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ \_\_\_\_\_ 3,351.49

Transfers to Office Account    \$ \_\_\_\_\_ 0.00

Total Monetary    \$ \_\_\_\_\_ 0.00

**(8) Other Distributions**

\$ \_\_\_\_\_ 0.00

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ 37,712.67

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ 37,712.67

**(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) Kurt F. Jung  
 Individual (only for electioneering commun)     Treasurer     Deputy Treasurer

**X** [Signature]  
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Elliott Dorsch  
 Candidate     Chairperson (only for PC, PTY & electioneering commun. organization)

**X** [Signature]  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Elliott Dorsch (2) I.D. Number TR

(3) Cover Period 11 / 04 / 2011 through 02 / 06 / 2012 (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		Amount
/ /	NOTHING TO REPORT						
/ /							
/ /							
/ /							
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Elliott Dorsch

(2) I.D. Number TR

(3) Cover Period 11 / 04 / 2011 through 02 / 06 / 2012

(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					
02 / 06 / 12	Elliott Dorsch 1845 E Memorial Blvd Lakeland, FL 33801	Disposal of Funds	DIS		\$3,351.49
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