	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Sam Collins	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	11342 NW 31st Road	Submitted on:						
	Address (number and street) Gainesville, FL 32606	7/25/2016 10:53:42 (eastern)						
	City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 455						
(4)	Check appropriate box(es):	(5) 12 1131112011						
(~)	☐ Check appropriate box(es). ☐ Candidate Office Sought: Clerk of the (Circuit Court						
	Political Committee (PC)							
		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						
	individual making electioneering communications)	Ollect here if no other in or no reports will be mos						
_	• • •	: Identifiers						
	rer Period: From 7 / 9 / 2016 To	7 / 22 / 2016 Report Type: 16P3						
<u>X</u> 0	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$, , <u>100</u> . <u>00</u>	Expenditures \$, , 0 . 00						
Loor	ns \$, , 0.00	Transfers to						
Loar	is	Office Account \$, , 0 . 00						
Tota	al Monetary \$, , 100 . 00	,,,						
, 0.0		Total Monetary \$, , 0 . 00						
In-Ki	ind \$, , 0.00	· · · · · · · · · · · · · · · · · · ·						
		(8) Other Distributions						
	1	\$,, <u>0</u> . <u>00</u>						
(0)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(9)	\$,,,	\$, , 51 94						
	, <u>, , , , , , , , , , , , , , , , , , </u>	, <u>J</u> , <u>J</u> , <u>J</u> ,						
	(11) Cert							
	It is a first degree misdemeanor for any person	• • • • • • •						
Ιc	I certify that I have examined this report and it is true, correct, and complete:							
(T	ype name)	(Type name)						
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	ignature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameSam_Collins			(2) I.D. Number						
	7/9/2016			/22/2016					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	1	of ¹		
1000. 98			1000						
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)								
Sequence	Street Address &	Co	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
7/11/2016	Zolt, Murray	I		СН			\$100.0		
1 1	6818 NW 90 St Gainesville, Fl 32653								
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Sam Co	AMPAIGN TREASURER'S Rollins	(2	D EXPENDITURES (2) I.D. Number 455		
3) Cover Period _	7/9/2016 7/ 	22/2016 _//(4	4) Page1	of	0
(5) Date (6) Sequence Number	(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)	(11) Amount
//					
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CAMPAIGN TREASURER'S REPORT – CONTRIBUTOR SUMMARY

Covers all contributions for this election cycle through <u>2016-07-25</u> 10:53:42

Name Sam Collins I.D. Number 455

Page ___1__

Name/Address	Date	Type	Contributor Occupation	Contribution Type	In-Kind Description	Amendment	Amount
Contributor Subtotal							\$0.00
Collins, Sam 11342 NW 31 Road Gainesville, FL 32606	6/30/2016	S	self	LO			\$505.00
Contributor Subtotal							\$505.00
Glaeser, Joan 2613 B NW 104 Court Gainesville, FL 32606	7/8/2016	I	retired	СН			\$100.00
Contributor Subtotal							\$100.00
Zolt, Murray 6818 NW 90 St Gainesville, Fl 32653	7/11/2016	I		СН			\$100.00
Contributor Subtotal							\$100.00
LAST PAGE							