

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

(1) Mack Samuel  
**Name**  
 (2) 8951 NW 8th Avenue  
**Address (number and street)**  
Miami, FL 33150  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1023394]  
 Submitted on:  
 9/23/2010 21:25:20 (eastern)

**CHECK IF ADDRESS HAS CHANGED** (3) ID Number: 780

(4) **Check appropriate box(es):**  
 Candidate (office sought): County Commission 02  
 Political Committee  **CHECK IF PC HAS DISBANDED**  
 Committee of Continuous Existence  **CHECK IF CCE HAS DISBANDED**  
 Party Executive Committee  **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**  
 **Electioneering Communication**

**(5) REPORT IDENTIFIERS**  
 Cover Period: From 4/1/2010 To 7/16/2010 Report Type F1-10  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>700.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>700.00</u>
In-Kind	\$	<u>0.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>339.20</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>339.20</u>

**(8) Other Distributions**  
 \$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
 \$ 5,770.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 3,441.39

**(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) \_\_\_\_\_  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer  
**X** \_\_\_\_\_  
 Signature

I certify that I have examined this report and it is true, correct, and complete.  
 (Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)  
**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Mack Samuel (2) I.D. Number 780

4/1/2010 through 7/16/2010

(3) Cover Period      /      /      through      /      /      (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 Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
4/23/2010 / /	Troy, Sharon 9400 SW 17th Avenue Advance Learning Center Miami, FL 33147	B	school administrator	CH		Add	\$200.00
1							
6/4/2010 / /	Mayer, Michael 3132 Center St Miami, FL 33133	I	manager	CH		Add	\$500.00
2							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Mack Samuel

(2) I.D. Number 780

(3) Cover Period 4/1/2010 through 7/16/2010

(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
6/17/2010 //	WLQY Radio Station, Jean Boyer 10800 Biscayne Blvd Miami, FL 33161	advertisement	MO	Add	\$200.00
1					
6/17/2010 //	USPS, 9825 NE 2nd Avenue Miami, FL 33153	post-office	MO	Add	\$75.00
2					
6/25/2010 //	Sign Supply, 8047 NW 64th Street Miami, FL 33166	step stake	MO	Add	\$64.20
3					
//					
//					
//					
//					
//					