

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

(1) Martin Karp  
Name  
(2) 20021 NE 21st Avenue  
Address (number and street)  
Miami, FL 33179  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1030702]  
Submitted on:  
10/3/2011 10:49:05 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 781

(4) Check appropriate box(es):  
 Candidate (office sought): School Board District 3  
 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 7/1/2011 To 9/30/2011 / Report Type Q3-11  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 850.00  
 Loans \$ 0.00  
 Total Monetary \$ 850.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 9.60  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 9.60

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

**(9) TOTAL Monetary Contributions To Date**  
 \$ 124,815.81

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 1,376.44

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p><b>X</b> _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY &amp; electioneering commun. organization)</p> <p><b>X</b> _____</p> <p>Signature</p>
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name     Martin Karp     (2) I.D. Number     781      
 7/1/2011 9/30/2011  
 (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 Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
8/1/2011 / /	Stinson, Solomon 6900 NW 5th Ave Miami, Fl 33150	I	retired	CH			\$250.00
1							
8/8/2011 / /	Lawerence, David 2800 Toledo St. Apt. 2 Coral Gables, Fl 33134	I	pres. early childhood	CH			\$250.00
2							
9/1/2011 / /	Scheck, Steven 1486 President Way North Miami Beach, Fl 33179	I	vp powerhouse nat.	CH			\$100.00
3							
9/8/2011 / /	Scheck, Jeffrey 19400 Ambassador Ct. Miami, Fl 33179	I	vp scheck group	CH			\$100.00
4							
9/8/2011 / /	Scheck, Martin 1446 Presidential Way Miami, Fl 33179	I	vp scheck group	CH			\$100.00
5							
9/30/2011 / /	De Priest, Louis 120 NW 156th St Miami, Fl 33169	I	teacher	CH			\$25.00
6							
9/30/2011 / /	De Priest, Lisa 120 NW 156th St Miami, Fl 33169	I	humane so. educator	CH			\$25.00
7							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Martin Karp

(2) I.D. Number 781

7/1/2011 through 9/30/2011

(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) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
9/30/2011 / /	Paypal, PO Box 45950 Omaha, NE 45950	paypal fee	MO		\$9.60
1					
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