

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Samuel Joseph Slom  
 Name

(2) 1351 NW 12TH Street; Suite 513  
 Address (number and street)

Miami, FL 33125  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1143559]

Submitted on:  
 8/2/2017 07:35:49 (eastern)

Check here if address has changed

(3) ID Number: 2033

(4) Check appropriate box(es):

- Candidate Office Sought: County Court Judge Group 03
- 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 7 / 1 / 2017 To 7 / 31 / 2017 Report Type: 17M07

Original  Amendment  Special Election 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 \$        ,        , 488 . 54

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 488 . 54

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 3 , 000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 488 . 54

### (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 IE or electioneering comm.)  Treasurer  Deputy Treasurer

**X** \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC and PTY)

**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Samuel Joseph Slom (2) I.D. Number 2033

(3) Cover Period 7/1/2017 through 7/31/2017 (4) Page 1 of 0

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

(1) Name Samuel Joseph Slom

(2) I.D. Number 2033

(3) Cover Period 7/1/2017 through 7/31/2017

(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
7/14/2017 / /	Minuteman Press, 921 NE 79 Street Miami, FL 33138	printing	MO		\$189.94
1					
7/25/2017 / /	Minuteman Press, 921 NE 79 Street Miami, FL 33138	printing	MO		\$102.60
2					
7/26/2017 / /	Postmaster, 5927 SW 70 Street South Miami, FL 33143	postage stamps	MO		\$196.00
3					
/ /					
/ /					
/ /					
/ /					
/ /					