

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
 [1155514]

Submitted on:
 6/1/2018 13:27:18 (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 5 / 1 / 2018 To 8 / 2 / 2018 Report Type: 18TQJ

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 \$, 1 , 016 . 26

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 1 , 016 . 26

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 125 , 611 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 125 , 125 . 41

(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

5/1/2018 through 8/2/2018

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (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 5/1/2018 through 8/2/2018

(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					
5/21/2018 //	Gross, Merrick 100 SE Second Street Ste 4200 Miami, FL 33131	pro-rata contribution reimbursement	MO	Add	\$25.18
1					
5/31/2018 //	YWCA, Samuel Joseph 351 NW 5 Street Miami, FL 33128	distribution surplus funds charity for 'court care'	MO	Add	\$991.08
2					
//					
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