

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sloan Bashinsky  
 Name  
 (2) PO Box 2681  
 Address (number and street)  
Key West, FL 33045  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1157486]  
 Submitted on:  
 6/21/2018 11:55:06 (eastern)

Check here if address has changed (3) ID Number: 437

(4) Check appropriate box(es):  
 Candidate Office Sought: City of Key West Mayor  
 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 6 / 1 / 2018 To 6 / 22 / 2018 Report Type: P1  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 0 . 00  
 Loans \$        , 1 , 350 . 00  
 Total Monetary \$        , 1 , 350 . 00  
 In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        , 1 , 350 . 00  
 Transfers to Office Account \$        ,        , 0 . 00  
 Total Monetary \$        , 1 , 350 . 00

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 1 , 650 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 1 , 350 . 00

### (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 Sloan Bashinsky (2) I.D. Number 437

(3) Cover Period 6/1/2018 through 6/22/2018 (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
6/21/2018 / /	Bashinsky, Sloan PO Box 2681 Key West, FL 33045	S	retired	LO			\$1,350.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Sloan Bashinsky

(2) I.D. Number 437

(3) Cover Period 6/1/2018 through 6/22/2018

(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					
6/21/2018 //	Supervisor of Elections, 530 Whitehead St Ste 101 Key West, FL 33040	qualifying fee	MO		\$1,350.00
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