CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Miguel Soliman	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	1436 SW 6 Street	[1250511]								
	Address (number and street)	Submitted on: 10/13/2021 16:26:45 (eastern)								
	Miami, FL 33125	(eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:71								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Commissioner District 3</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
	(5) Report	Identifiers								
Cover Period: From 9 / 1 / 2021 To 10 / 1 / 2021 Report Type: G01										
□ 0	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ ,10 , _00000	Monetary								
Loar	s \$, <u>10</u> , <u>000</u> . <u>00</u>	Transfers to Office Account \$ , , 0 . 00								
Tota	I Monetary \$ , , , 000	Total Monetary \$ , , 0 . 00								
In-Ki	nd \$,,, <u>0</u> .00									
		(8) Other Distributions \$ , , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>2</u> , <u>091</u> . <u>89</u>								
(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										
X		X								
Si	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Miguel Soliman (2) I.D. Number 71							
	9/1/2021 10/1/2021 (3) Cover Period / / through / / (4) Page1 of _1						
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation candidate	Contribution Type CH	In-kind Description	Amendment	Amount \$10,000.0
9/28/2021	Soliman, Miguel 1436 SW 6 St Miami, Fl 33135	S	candidate	Сп		Delete	\$10,000.0
9/28/2021	Soliman, Miguel 1436 SW 6 St Miami, Fl 33135	S	candidate	LO		Add	\$10,000.0
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1 1							
J J							
1 1							
f I							
1 1							

(1) Name Migue	URES 71				
	9/1/2021 10/ / through	1/2021	) 1) Page <u>1</u>		0
(5) Date (6) Sequence Number	(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)	(11)
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