CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Shyla Sams	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1143558]							
(2) 4747 15th Ave. S.	Submitted on:							
Address (number and street) St. Petersburg, FL 33711	8/1/2017 19:38:16 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 931							
(4) Check appropriate box(es):								
Candidate Office Sought: School Board	Member - District 7 - Single Member							
Political Committee (PC)								
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	Check here if PC or ECO has disbanded Check here if PTY has disbanded							
	Check here if no other IE or EC reports will be filed							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From 7 / 1 / 2017 To	7 / <u>31</u> / <u>201</u> 7 Report Type:M7							
⊠ Original	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$,, 25 . 00	Expenditures \$,,,							
\$ 0.00	Tantan							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$							
Total Monetary \$, , 25.00	· · · · · · · · · · · · · · · · · · ·							
	Total Monetary \$,,0 . 00							
In-Kind \$,,0.00	· · · · · · · · · · · · · · · · · · ·							
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,,500	\$,,000							
(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)	(Type name)							
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
x	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(2) I.D. Number							
7/1/2017			7/31/2017					
(3) Cover Per	iod / /	thre	ough	11	(4) Page	e <u>1</u>	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount	
7/13/2017	Sams, Shyla C 4747 15th Ave South Saint Petersburg, FL 33711	S		CA			\$25.00	
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1 1	_							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name <u>Shyla Sams</u> (2) I.D. Number <u>931</u>							
	7/1/2017 // through_	7/31/2017	(4) Page <u>1</u>		0		
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Purpose (add office sought if contribution to a	Expenditure	(10)	(11)		
Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount		
_/ /							
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