

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ed Slavin  
 Name

(2) PO Box 3084  
 Address (number and street)  
St Augustine, FL 32085  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1255788]

Submitted on:  
 2/28/2022 08:12:58 (eastern)

Check here if address has changed

(3) ID Number: 1200

(4) Check appropriate box(es):

- Candidate Office Sought: Anastasia Mosq Control Dist. - Seat 2
- 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 2 / 1 / 2022 To 2 / 28 / 2022 Report Type: M2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 905 . 34

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 0 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 0 . 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 Ed Slavin (2) I.D. Number 1200  
 (3) Cover Period 2/1/2022 through 2/28/2022 (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) Sequence Number							
2/26/2022 / /	Slavin, Ed Box 3084 St. Augustine, FL 32085	S	retired	IK	all-in-one printer/fa x/copier machine, repair plan and		\$530.34
1							
2/27/2022 / /	Slavin, Ed P.O. Box 3084 St. Augustine, FL 32085-3084	S	retired	IK	retiree membership dues to our american mosquito		\$80.00
2							
2/27/2022 / /	Slavin, Ed P.O. Box 3084 St. Augustine, FL 32085	S	retired	IK	annual meeting registrati on fees for american		\$295.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ed Slavin

(2) I.D. Number 1200

(3) Cover Period 2/1/2022 through 2/28/2022

(4) Page 1 of 0

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					