

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY
 RECEIVED
 2013 NOV -4 PM 2:13
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI, FL

(1) Seth Sklarey
 Name

(2) Box 332172
 Address (number and street)
Cocoville Grove Fl 33233-2172
 City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Cocoville Grove Village Council
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 30 / 2013 To 10 / 31 / 2013 Report Type 64

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 500.00

Loans \$ 0

Total Monetary \$ 500

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 52

Transfers to Office Account \$ 0

Total Monetary \$ 52

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 500

(10) TOTAL Monetary Expenditures To Date
 \$ 52

(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) Seth Sklarey

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Seth Sklarey

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Soph Sklarey (2) I.D. Number _____

(3) Cover Period 10/30/2013 through 11/31/2013 (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
10/30/2013	78 (S) Street Committee 21534 WMC Ridge Rd Oviedo FL	C		C			\$500.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Seth Sklaroy

(2) I.D. Number _____

(3) Cover Period 10 / 30 / 2013 through 10 / 31 / 2013

(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
10/30/2013	JP Morgan Chase 4000 P.O. Box 14600 Coral Gables, FL	Bank fee for checks			2.00
10/30/2013	Christina Frank 3651 Logans Rd Miami, FL 33133	GOV ANNUNZISIS	CITE		50.00
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Seth Sklarov
Candidate for County Term
U. 11th St. Corner

Box 332192

Coconut Grove FL
33233-2192

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Todd Hain

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POSTAGE WILL BE PAID BY ADDRESSEE

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