CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Seth Sklarey	OFFICE USE ONLY						
` ,	Name	2015 OCT 30 PM 4: 46						
(2)	P O Box 332172	OFFICE OF THE CITY CLERK						
	Address (number and street)	CITY OF MIAMIOLERS						
	Coconut Grove FL 33233-2172 City, State, Zip Code							
	Check here if address has changed	(3) ID Number: N/A						
(4)	-	(5) ID Number.						
(4)	Check appropriate box(es):  ☑ Candidate Office Sought: Miami Comm ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	issioner District 2  ☐ 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						
(5) Report Identifiers								
Cov	er Period: From 10 / 17 / 2015 To	10 / 29 /2015 Report Type: 2015-G3						
<b>☑</b> C	original Amendment Spe	cial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cas	h & Checks \$ , , <u>00</u>	Monetary Expenditures \$,, <u>00</u>						
Loa	s,,	Transfers to Office Account \$ , ,,						
Total Monetary \$,, <u>00</u>		Total Monetary \$ , , 00						
ln-K	find \$,,							
		(8) Other Distributions \$ , , 00						
(9)	TOTAL Monetary Contributions To Date \$,1 , _71000	(10) TOTAL Monetary Expenditures To Date \$						
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)								
1	certify that I have examined this report and it is true, corr							
(7	<sub>Type name)</sub> J-P Morgan	(Type hame)						
	Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer relectioneering comm.)	☐ Chairperson (only for PC and PTY)						
0								
_>	( I my to	X						
ş	signature	Signature						

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name Seth Sklarey			(2) I.D. Number					
(3) Cover Period	10 / 17 / 2015	through 10 /	29 / 2015	_ (4) Page	of			
(5) Date	(7) Full Name	(8)	(9)	(10)	(11) (12)			
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment Amount			
1 1	MOTI	my A	• 0	Sw				
1 1								
1 1								
1 1								
1 1	-			3	0 20 TO			
					RECEIVED  RECHVER  RE			
1 1		Ā.			ERK 46			

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUE

## CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Seth S	klarey		(2) I.D. Number			
(3) Cover Period	10 / 17 / 2015 through 10 /	/ 29 / 2015 (4	l) Page	of	<u> </u>	
(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) Amount	
/ /	Noh	70	Repr	$\sqrt{}$		
//		/				
//						
/ /						
//			n p.	3		
//				BERT OF MIXA OLERK		
//	,			JLERK	Caus	