

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sam H. Young
 Name
 (2) 191 Lamplighter Drive
 Address (number and street)
Marco Island, FL 34145
 City, State, Zip Code

OFFICE USE ONLY
RECEIVED
JUL 31 2018
 CITY OF MARCO ISLAND

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Marco Island City Council
- 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 7/21/2018 / _____ To 07/27/2018 / _____ Report Type: 2018P4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 1 000 00

Loans \$ _____ , _____ , 000 00

Total Monetary \$ _____ , _____ , 000 00

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 670.00

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 670.00

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 6300.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 1235.16

(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:

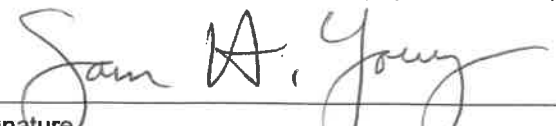
(Type name) Douglas R. Woodworth

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
 Signature

(Type name) Sam H. Young

Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Sam H. Young

(2) I.D. Number _____

(3) Cover Period 7/21/18 / ____ / ____ through 7/27/2018 / ____ / ____

(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							
7/15/2018 / /	Michaelon A. Wright Rev. Trust	I	Retired	Check			100.00
1							
7/15/2018 / /	Bob Olson PO Box 5100 Marco Island, FL 34145	I	Retired	Check			100.00
2							
7/25/2018 / /	John C. Moore 679 Thrush Court Marco Island, FL 34145	I	Consultant	Check			300.00
3							
7/25/2018 / /	Santo Gentile 1609 Villa Ct. Marco Island, FL	I	Restaurant	Check			300.00
4							
7/25/2018 / /	Unknown	CAS					100.00
5							
7/25/2018 / /	Unknown	CAS					100.00
6							
/ /							1000.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sam Young

(2) I.D. Number _____

(3) Cover Period 7/21/18 / _____ / _____ through 7/27/2018 / _____ / _____

(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
(6) Sequence Number					
7/24/2018 / /	The Print Shop 2321 Davis Blvd. Naples, Fl 34104	Signage	CAN		\$155.46
7/24/2018 / /	Marco Office Supply 571 Bald Eagle Marco Island, Fl. 34145	Stationary	CAN		\$20.12
7/25/2018 / /	Print Shop 2321 Davis Blvd. Naples, Fl 34104	Cards	CAN		\$68.90
7/25/2018 / /	Joey's Pizza 257 N Collier Blvd, Marco Island, FL 34145	Meet and Greet	CAN		\$355.80
7/27/2018 / /	Sam Young 191 Lamplighter Drive Marco Island, FL 34145	Misc. Office supplies, grommets	CAN		\$69.72
/ /					
/ /					
/ /					
/ /					670