

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Gary Robinson
 Name
 (2) 5830 SW 85th St.
 Address (number and street)
South Miami, FL. 33143
 City, State, Zip Code



(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):
 Candidate Office Sought: Commisioner #1
 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 05/01/2017 / _____ To 05/31/2017 / _____ Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 100.00 , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ 0 , _____ , _____ . _____

Transfers to Office Account \$ 0 , _____ , _____ . _____

Total Monetary \$ 0 , _____ , _____ . _____

(8) Other Distributions
 \$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date
 \$ 100.00 , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date
 \$ 0 , _____ , _____ . _____

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

X _____
 Signature

(Type name) Gary Robinson
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Gary Robinson (2) I.D. Number _____

(3) Cover Period 05/01/2017 / _____ / _____ through 05/31/2017 / _____ / _____ (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
05/22/2017 / /	Robinson, Gary	S	Realtor	Cash	A		\$100.00
01							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

RECEIVED

JUN 05 2017

CITY CLERK'S OFFICE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Gary Robinson

(2) I.D. Number _____

(3) Cover Period 05/01/2017 / _____ through 05/31/2017 / _____

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

