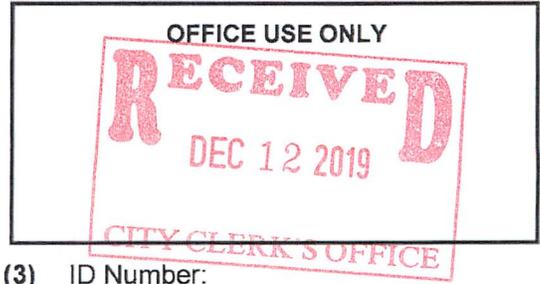


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Cooper Welsh, Jr
Name

(2) 7437 SW 64 Ct
Address (number and street)
South Miami, FL 33143
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner Group III
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- 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

Cover Period: From 12 / 1 / 19 To 12 / 6 / 19 Report Type: 61

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, _____ 0

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 220.00

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 1,000, _____

(10) TOTAL Monetary Expenditures To Date

\$ _____, 220.00, _____

(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) Robert Cooper Welsh, Jr

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

Robert Cooper Welsh, Jr

Signature

(Type name) Robert Cooper Welsh, Jr

Candidate Chairperson (only for PC and PTY)

Robert Cooper Welsh, Jr

Signature



CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Robert Cooper Welsh, Jr

(2) I.D. Number _____

(3) Cover Period 12 / 1 / 19 through 12 / 6 / 19

(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
12/2/19	City Of South Miami 6130 Sunset Dr South Miami, FL 33143		check		220 ⁰⁰
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