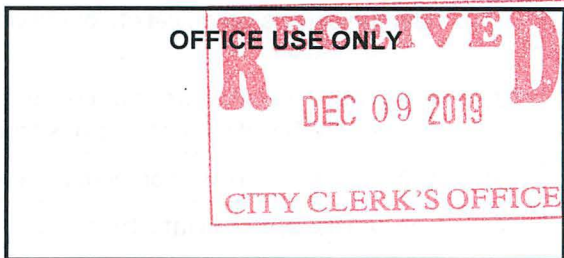


CAMPAIGN TREASURER'S REPORT SUMMARY

(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: SOUTH MIAMI 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 11 / 26 / 19 To 11 / 30 / 19 Report Type: M 11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , 1 , 000.00

Total Monetary \$ _____ , 1 , 000.00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 220.00 ^{RCW}

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 220.00 ^{RCW}

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 000.00
RCW

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 220.00
RCW
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:

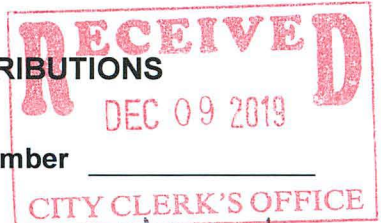
(Type name) Robert Cooper Welsh Jr
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Robert Cooper Welsh Jr
Signature

(Type name) Robert Cooper Welsh Jr
 Candidate Chairperson (only for PC and PTY)

X Robert Cooper Welsh Jr
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS



(1) Name Robert Cooper Welsh, Jr.

(2) I.D. Number _____

(3) Cover Period ___ / ___ / ___ through ___ / ___ / ___

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation				
11, 26, 19	Welsh, Jr Robert C 7437 SW 64 Ct S. MIAMI, 33143	S.	self comms.	LOA			1,000 ⁰⁰
(6)							
/ /							
/ /							
/ /							
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