

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Robin Fisher
Name
(2) _____
Address (number and street)

City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1052200]
Submitted on:
1/31/2013 08:54:32 (eastern)

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 439

(4) Check appropriate box(es):

- Candidate (office sought): County Commissioner, District 1
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee
 Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10/13/2012 To 11/1/2012 Report Type G4
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>-540.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>-540.00</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 74,227.18

(10) TOTAL Monetary Expenditures To Date
\$ 50,478.26

(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)
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer
X

 Signature

I certify that I have examined this report and it is true, correct, and complete.

 (Type name)
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
X

 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robin Fisher (2) I.D. Number 439

10/13/2012 through 11/1/2012

(3) Cover Period / / through / / (4) Page 1 of 0

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

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robin Fisher

(2) I.D. Number 439

(3) Cover Period 10/13/2012 through 11/1/2012

(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					
10/30/2012 / /	Impact Campaigns, 200 E. Government St Pensacola,, fl 32502	brochure mailer	MO	Delete	\$10,825.83
1					
10/30/2012 / /	Impact Campaigns, 200 E. Government St Pensacola,, fl 32502	brochure mailer	MO	Add	\$10,285.83
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					