

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

(1) Robert 'Bob' Wilcosky  
**Name**

(2) 12500 SW 87th Place  
**Address (number and street)**

Miami, FL 33176-5210  
**City, State, Zip Code**

**CHECK IF ADDRESS HAS CHANGED**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**

(3) ID Number: 642

(4) **Check appropriate box(es):**

Candidate (office sought): Community Council 12/126

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 8/22/2008 To 11/24/2008 Report Type TR-F0

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 40.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 40.00

(8) Other Distributions \$ 0.00

**(9) TOTAL Monetary Contributions To Date**

\$ 4,520.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 4,028.62

**(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.

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(Type name) \_\_\_\_\_  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

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

**X** \_\_\_\_\_  
Signature

**X** \_\_\_\_\_  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert 'Bob' Wilcosky (2) I.D. Number 642

8/22/2008 through 11/24/2008

(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
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Robert 'Bob' Wilcosky

(2) I.D. Number 642

8/22/2008 through 11/24/2008

(3) Cover Period      /      /      through      /      /     

(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					
11/17/2008 / /	Coconut Grove Bank, 14695 South Dixie Highway Miami, FL 33176	checking account fee	MO		\$40.00
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