FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) Robert W. Wilcosky Candidate, Committee or Party Name **(2)** I.D. Number (3) _____12500 SW 87th Place, Miami, FL 33176 Address (number and street) State Zip Code Check box if address has changed since last report **(4)** Check appropriate box(es): Candidate (office sought) Community Council 12/126 Political Committee Check if PC has DISBANDED Committee of Continuous Existance Check if CCE has DISBANDED ☐ Party Executive Committee (5) Report Identifiers 8/7/2004 - 8/26/2004 Report Type: F3-04 Cover Period: X Original Amendment Special Election Report Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary \$ ______20.00 \$ _____0.00 Cash & Checks Expenditures Transfers to Office \$_____0.00 \$_____0.00 Loans Account \$____0.00 Total Monetary Total Monetary \$_____0.00 (8) Other Distributions In Kind (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 120.00 120.00 (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 I certify that I have examined this report and it is true, correct and complete. true, correct and complete. Name of Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name_Robert W. Wilcosky				(2) I.D. Number333			
(3) Cover Period 8/7/2004 - 8/26/2004				1 of0			
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution	In-kind	Amendment	Amount
Number	City, State, Zip Code	туре	Occupation	Туре	Description	Amendment	Amount

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(2) I.D. Number ______333 (1) Name Robert W. Wilcosky (4) Page _____1 of ___1 (3) Cover Period 8/7/2004 - 8/26/2004 (10) (5) **(7)** (8) (9) (11) **Full Name Purpose** Date (Last, Suffix, First, Middle) (add office sought if) (6) Street Address & contribution to a Sequence Expenditure Number City, State, Zip Code candidate Type Amendment Amount Wilcosky, Robert Wooding repayment MO \$20.00 8/7/2004 12500 SW 87th Place of loan Miami, FL 33176 1