FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Robert (Bob) Hudson	OFFICE USE ONLY						
Name							
(2) 121 Fairway Drive							
Address (number and street)							
Santa Rosa Beach, FL 32459							
City, State, Zip Code	<u> </u>						
CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es):	i.L. F						
	CHECK IF PC HAS DISBANDED						
Committee of Continuous Existence	CHECK IF FO HAS DISBANDED						
☐ Party Executive Committee							
☐ Election mur	CHEC ER ERING						
	COMMU CATIO RE PRI WII BE FILED						
9/1/2008 / REPC T							
Cover Period: F m //1/2008	12/1/2008 / Re rt Type ^{TR}						
☑ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
	Monetary						
Cash & Checks \$0.00	Expenditures \$ 16,845.24						
Φ 0.00	E22 0 10 100 NAS						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$ 0.00	0.00						
Total Monetary \$	Total Monetary \$ 16,845.24						
In-Kind \$ 0.00	Monetary \$ 16,845.24						
III-NIIU	(8) Other Distributions						
	(8) Other Distributions						
	·						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$46,885.00_	\$46,885.00_						
(44) 0555	I CATION						
(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,						
I certify that I have examined this report and it is true, correct, and complete. I certify that I have examined this report and it is true, correct, and complete.							
(Type name)	(Type name)						
Individual (only for Treasurer Deputy Treasurer	Candidate Chairperson (only for PC, PTY &						
electioneering commun.)	electioneering commun. organization)						
<u>X</u>	X						
Signature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert (Bob) Hudson				(2) I.D. Number				
9/1/2008			1	12/1/2008				
(3) Cover Perio	od//	thro	ough	1 1	(4) Pag	e 1	of	
			7000			× **		
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)	_		_				
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	N	
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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DS-DE 13 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Robe	CAMPAIGN TREASURER'S RE ert (Bob) Hudson		/IIZED EXPENDITURES (2) I.D. Number 105			
		1/2008	4) Page <u>1</u>		1	
(5) Date (6) Sequence Number	(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)	(11) Amount	
11/1/2008	Hudson, Robert L 121 Fairway Drive Santa Rosa Beach, FL 32459	reimburse candidate loan	МО		\$16,845.24	
//	DR					
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