

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

(1) Robert Skidmore  
Name  
(2) P.O. Box 5069  
Address (number and street)  
Englewood, FL 34224  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1026807]  
Submitted on:  
1/10/2011 12:53:14 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 213

(4) Check appropriate box(es):  
 Candidate (office sought): County Commissioner District 3  
 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 10/1/2010 To 12/31/2010 Report Type Q4  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 1,000.00  
 Loans \$ 0.00  
 Total Monetary \$ 1,000.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 43.00  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 43.00

**(8) Other Distributions**  
 \$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
 \$ 13,160.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 2,136.48

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p><b>X</b> _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY &amp; electioneering commun. organization)</p> <p><b>X</b> _____</p> <p>Signature</p>
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert Skidmore (2) I.D. Number 213

10/1/2010 through 12/31/2010

(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) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
11/18/2010 / /	Prints Inc., 119 East Park Avenue Tallahassee, FL 32301	B	printing	CH			\$500.00
1							
12/1/2010 / /	Englewood Environmental, 2810 Ave of Americas Englewood, FL 34224	B	septic installer	CH			\$500.00
2							
/ /							
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert Skidmore

(2) I.D. Number 213

(3) Cover Period 10/1/2010 through 12/31/2010

(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					
12/1/2010 / /	Postmaster, Englewood, FL 34224	post office box	MO		\$43.00
1					
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