

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

(1) Robert Skidmore
Name

(2) PO Box 5069
Address (number and street)

Englewood, FL 34224-5069
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY
ONLINE SUBMISSION
[1013270]

(3) ID Number: 113

(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 8/2/2008 To 8/21/2008 / Report Type F308
 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>0.97</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.97</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 56,429.58

(10) TOTAL Monetary Expenditures To Date
\$ 56,429.58

(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 Robert Skidmore (2) I.D. Number 113

8/2/2008 through 8/21/2008

(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 Skidmore

(2) I.D. Number 113

(3) Cover Period 8/2/2008 through 8/21/2008

(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
8/14/2008 //	Postmaster, Punta Gorda, FL 33951	postage	MO	Delete	\$213.80
1					
8/14/2008 //	Postmaster, Punta Gorda, FL 33951	postage	MO	Add	\$213.82
2					
8/4/2008 //	BankCard, Boston, MA	statement fee	MO	Delete	\$10.00
3					
8/4/2008 //	BankCard, Boston, MA	statement fee	MO	Add	\$10.95
4					
//					
//					
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