

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

(1) Robert Marshall
Name

(2) 3482 Pennyroyal Rd
Address (number and street)

Port Charlotte, FL 33953
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY
ONLINE SUBMISSION
[1010346]

(3) ID Number: 126

(4) Check appropriate box(es):

- Candidate (office sought): Riverwood CDD, Group 1
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 9/27/2008 To 10/10/2008 Report Type G308

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>30.11</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 100.00

(10) TOTAL Monetary Expenditures To Date
\$ 2.00

(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 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 Marshall **(2) I.D. Number** 126
(3) Cover Period 9/27/2008 through 10/10/2008 **(4) Page** 1 of 1

(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
10/1/2008 / /	Bacon, Ron & Deb 13688 Long Lake Lane Port Charlotte, FL 33953	I	both are retired.	IK	hospitalit y event		\$30.11
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert Marshall

(2) I.D. Number 126

(3) Cover Period 9/27/2008 through 10/10/2008

(4) Page 1 of 0

(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
// /					
// /					
// /					
// /					
// /					
// /					