

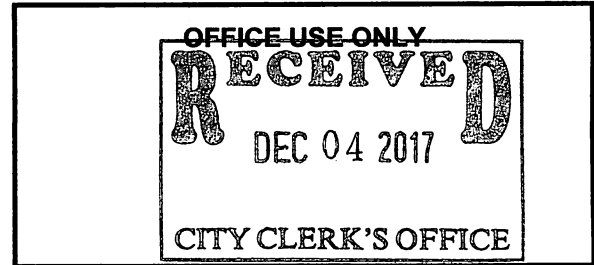
## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Gary Robinson  
Name

(2) 5790 SW 84th St  
Address (number and street)

South Miami, FL 33143  
City, State, Zip Code

Check here if address has changed



(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 11 / 1 / 17 To 11 / 30 / 17 Report Type: M11

Original       Amendment       Special Election Report

(6) Contributions This Report	
Cash & Checks	\$ _____, _____, <u>850.</u> <sup>00</sup>
Loans	\$ _____, _____, _____
Total Monetary	\$ _____, _____, <u>850.</u> <sup>00</sup>
In-Kind	\$ _____, _____, _____

(7) Expenditures This Report	
Monetary Expenditures	\$ <u>1,015.</u> <sup>13</sup>
Transfers to Office Account	\$ _____, _____, _____
Total Monetary	\$ <u>1,015.</u> <sup>13</sup>

(8) Other Distributions  
\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date  
\$ \_\_\_\_\_, \_\_\_\_\_, 4000.<sup>00</sup>

(10) TOTAL Monetary Expenditures To Date  
\$ \_\_\_\_\_, \_\_\_\_\_, 1090.<sup>11</sup>

### (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) Gary Robinson

Individual (only for IE or electioneering comm.)     Treasurer     Deputy Treasurer

X \_\_\_\_\_  
Signature

(Type name) GARY ROBINSON

Candidate     Chairperson (only for PC and PTY)

X \_\_\_\_\_  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name GARY ROBINSON (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 1 / 17 through 11 / 30 / 17 (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
(6) Sequence Number		Type	Occupation	Type	Description		
11, 2, 17	Kyle SAXON 6820 SW 65 Ave Miami FL	I	Self Lawyer	RCT	state/rct		100. <sup>00</sup>
1							
11, 2, 17	Linn Pankay 4770 Discage Miami	I	Lawyer	CK			250. <sup>00</sup>
2							
11, 10, 17	John Hureby 5724 Sunset Dr Miami 33143	I	Retailer	CK			250. <sup>00</sup>
3							
11, 13, 17	Jell Levey 9130 S. Dadelant Miami 33156	I	Lawyer	CK			250. <sup>00</sup>
4							
1 / 1							
1 / 1							
1 / 1							

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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name GARY ROBINSON

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 1 / 17 through 11 / 30 / 17

(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
11/27/17 1	Facebook 1 Hacker Way Menlo Park CA 94025	Ad	CAN		32.14
11/24/17 2	Nation builder 520 Grand Ave Los Angeles CA 90071	SOFTWARE	CAN		29.00
11/16/17 3	Printing on the Mark 776 NW 100 ST MIA FL 33150	Door Hangars	CAN		936.25
11/18/17 4	Facebook 1 Hacker Way Menlo Park CA	AD	CAN		18.74
1 / 1					
1 / 1					
1 / 1					
1 / 1					

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