(1) Rame Carte C	FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
Name	(1) Robert MaloneTr	OFFICE USE ONLY						
(4) Cheek appropriate box(es):	(2) 1825 NW 47th lecrere Address (number and street) Mismi, FL 33142	REC TYOF I						
Candidate (office sought):	☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
Cover Period: From / / 0 (/ 2 io 3 To 06 / 30 / 2p 13 Report Type	☐ Candidate (office sought): ☐ Ommission ☐ Political Committee ☐ Committee of Continuous Existence ☐ Party Executive Committee	CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED CHECK IF NO OTHER ELECTIONEERING						
Contributions This Report								
(6) CONTRIBUTIONS THIS REPORT Cash & Checks Loans \$ \(O 0 \cdot \cdo								
Cash & Checks \$ Loans \$ 00.00 Transfers to Office Account \$ Total Monetary \$ In-Kind \$ (8) Other Distributions (9) TOTAL Monetary Contributions To Date \$ (10) TOTAL Monetary Expenditures To Date \$ (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) Lobert Malone I certify that I have examined this report and it is true, correct, and complete. (Type name) Lobert Malone I certify that I have examined this report and it is true, correct, and complete. (Type name) Lobert Malone I certify that I have examined this report and it is true, correct, and complete. (Type name) Lobert Malone I certify that I have examined this report and it is true, correct, and complete. (Type name) Lobert Malone I certify that I have examined this report and it is true, correct, and complete. (Type name) Lobert Malone I chairperson (only for PC, PTY &	☐ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report							
Expenditures Expe	(6) CONTRIBUTIONS THIS REPORT							
Account Total Monetary In-Kind (8) Other Distributions (9) TOTAL Monetary Contributions To Date \$ (10) TOTAL Monetary Expenditures To Date \$ (10) TOTAL Monetary Expenditures To Date \$ (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) Cobert Malone Individual (only for Treasurer Deputy Treasurer Candidate Chairperson (only for PC, PTY &	Cash & Checks \$							
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X Last Mobile X Adust Mobile 1.	electioneering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)						
Signature Signature		Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lobert Ma(ose) (2) 1.D. Number								
(3) Co	ver Perio	od <u>04 / 01 / 20</u>	1 <u>13</u> thro	ough <u>06</u>	130 120	(4) Pag	ge <u>\</u>	of <u>\</u>
(5 <u>Da</u> (6 Segui Num	te i) ence	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12)
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