

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

(1) ROBERT G MCCLURE  
**Name**

(2) 5665 RUSSELL DR  
**Address (number and street)**

MILTON FL 32570  
**City, State, Zip Code**

MILTON, FL 32570-4592  
**OFFICE USE ONLY**  
 2008 AUG 22 AM 10 19

CHECK IF ADDRESS HAS CHANGED

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

(4) Check appropriate box(es):

- Candidate (office sought): SANTA ROSA COUNTY TAX COLLECTOR
- 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 08 / 02 / 08 To 08 / 21 / 08 Report Type F3

- Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 151.00

Loans \$ 250.00

Total Monetary \$ 401.00

In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 821.17

Transfers to Office Account \$ 0.00

Total Monetary \$ 821.17

**(8) Other Distributions**

\$ 0.00

**(9) TOTAL Monetary Contributions To Date**

\$ 6,126.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 5,761.62

**(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) Amy Brinkerhoff  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X** Amy Brinkerhoff  
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Robert G McClure  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

**X** Robert G McClure  
 Signature

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

(1) Name ROBERT G MCCLURE (2) I.D. Number \_\_\_\_\_

(3) Cover Period 08 / 02 / 2008 through 08 / 21 / 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
(6) Sequence Number							
08 / 12 / 2008	ROBERT MCCLURE 5665 RUSSELL DR MILTON FL 32570	I	SRC TAX COLLECTO R	LOA			250.00
#1							
08 / 18 / 2008	R D SLINGERLAND 3225 ROBINSON PT RD MILTON FL 32583	I		CHE			50.00
#2							
08 / 18 / 2008	RODERICK GRACEY 5001 CANAL ST MILTON FL 32570	I		CHE			50.00
#3							
08 / 19 / 2008	PHIL PAREKH 754 BOULDER CREEK DR PENSACOLA FL 32514	I		CHE			51.00
#4							
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ROBERT G MCCLURE (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 08 / 02 / 2008 through 08 / 02 / 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
(6) Sequence Number					
08 / 13 / 08	GULF BREEZE NEWS 913 GULF BREEZE PKWY UNIT 35 GULF BREEZE FL	ADVERTISEMENT	MON		\$768.25
#1					
08 / 13 / 08	POSTMASTER 4629 FORSYTHE ST BAGDAD FL 32530	POSTAGE	MON		\$52.92
#2					
/ /					
/ /					
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