

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

(1) Robert C. Manning
Name

(2) 14 Island Dr.
Address (number and street)

Treasure Island, FL 33706
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Commissioner - City District 3
- 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 01 / 10 / 07 To 01 / 26 / 07 Report Type G 1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 300.00

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 104.00

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 300.00

(10) TOTAL Monetary Expenditures To Date

\$ 104.00

(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) Robert C. Manning

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Robert C. Manning
Signature

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

(Type name) Robert C. Manning

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Robert C. Manning
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Robert E. Minning (2) I.D. Number _____

(3) Cover Period 01 / 10 / 2007 through 01 / 26 / 2007 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
01 / 10 / 07 01	Minning, Robert C. 14 Island Dr. Treasure Island FL 33706	I	Geologist	CHE			\$300.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Robert C. Munnig

(2) I.D. Number _____

(3) Cover Period 01 / 10 / 07 through 01 / 26 / 07

(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					
01 / 12 / 07	City of Treasure Island 1201 108th Avenue Treasure Island, FL 33706	Qualifying Fee	mon		\$ 104.00
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