## FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) ROBERT MAJESKA (2) ROBERT MAJESKA Candidate, Committee or Party Name (3) 38 MUTINY PLACE 33037 KEY LARGO Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): Candidate (office sought): \_\_\_\_\_ KEY LARGO WASTEWATER BD Check if PC has DISBANDED Political Committee Committee of Continuous Existence Check if CCE has DISBANDED Party Executive Committee (5) REPORT IDENTIFIERS 9/13/2008 9/26/2008 Report Type: G2 Cover Period: To From 🖊 Original Special Election Report Amendment Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary Cash & Checks Expenditures Transfers to Office 0.00 0.00 Loans Account 0.00 Total Monetary Total Monetary 0.00 0.00 In-Kind (8) Other Distributions (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 1,754.43 2,350.00 \$ (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 I certify that I have examined this report and it is true. true, correct and complete correct and complete Name of Candidate Chairman (PC/PTY only) Name of Treasurer Deputy Treasurer X Signature Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	ROBERT MAJESKA			(2) I.D. Number ROBERT MAJESKA				
(3) Cover Period _	9/13/2008	through	9/26/2008	(4) Page	1	of	1	

(7)	(8)	(9)	(10)	(11)
Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
ISLAND INFORMATION SERVICES 219 SECOND ST KEY LARGO, FL 33037	ADVERTISING MAILER CARDS	MON		131.15
	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code  ISLAND INFORMATION SERVICES 219 SECOND ST	Full Name (Last, Suffix, First, Middle) Street Address & (add office sought if contribution to a candidate)  ISLAND INFORMATION SERVICES 219 SECOND ST  Purpose (add office sought if contribution to a candidate)  ADVERTISING MAILER CARDS	Full Name (Last, Suffix, First, Middle) Street Address & (add office sought if contribution to a candidate)  ISLAND INFORMATION SERVICES 219 SECOND ST  Purpose (add office sought if contribution to a candidate)  Expenditure Type  MON	Full Name (Last, Suffix, First, Middle) Street Address & (add office sought if contribution to a candidate)  ISLAND INFORMATION SERVICES 219 SECOND ST  Purpose (add office sought if contribution to a candidate)  Expenditure Type Amendment