

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Byron Donalds

ADDRESS (number and street)

11216 Tamiami Trail North, #132

Check if different than previously reported. (ACC)

Naples

FL

34110

2. FEC IDENTIFICATION NUMBER ▼

C C00509877

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

14

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer BYRON Lowell DONALDS

Signature of Treasurer BYRON Lowell DONALDS

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Byron Donalds

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	80051.88	102678.30
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	80051.88	102678.30
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35472.30	47567.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35472.30	47567.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	55110.54	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Byron Donalds

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	59945.66	71719.06
(ii) Unitemized.....	17155.70	24170.70
(iii) TOTAL of contributions from individuals ▶	77101.36	95889.76
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	4500.00
(d) The Candidate.....	950.52	2288.54
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	80051.88	102678.30
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	80051.88	102678.30

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35472.30	47567.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35472.30	47567.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10530.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	80051.88
25. SUBTOTAL (add Line 23 and Line 24).....	90582.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35472.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	55110.54

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Dr. Thomas Albert, Jr.

Mailing Address 12656 Biscayne Ct.

City: Naples State: FL Zip Code: 34105

FEC ID number of contributing federal political committee: **C**

Name of Employer: Orthodontist Occupation: The Brace Place

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 02 / 2012

Transaction ID : SA11AI.7675

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Thomas Albert, Jr.

Mailing Address 12656 Biscayne Ct.

City: Naples State: FL Zip Code: 34105

FEC ID number of contributing federal political committee: **C**

Name of Employer: Orthodontist Occupation: The Brace Place

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 05 / 17 / 2012

Transaction ID : SA11AI.7676

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Jerry Baker

Mailing Address 4013 Lakeridge Dr.

City: Holland State: MI Zip Code: 49424

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 05 / 17 / 2012

Transaction ID : SA11AI.7710

Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
James Barton

Mailing Address 8473 Bay Colony Dr.
#2004

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA11AI.7712

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Carson Beadle

Mailing Address 5051 Castello Drive, Suite 217

City Naples3s State FL Zip Code 34103

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Director, Security Mutual Life Insuran

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : SA11AI.7713

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
David Bego

Mailing Address P.O. Box 501796

City Indianapolis State IN Zip Code 46250

FEC ID number of contributing federal political committee. **C**

Name of Employer CEO Occupation EMS

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2012

Transaction ID : SA11AI.7714

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Beverly Bernstrom

Mailing Address 295 Grande Way

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired business manager Occupation Housewife

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.7718

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Michael Biondo

Mailing Address 8473 Bay Colony Drive #803

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11AI.7719

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
Mark Blakemore

Mailing Address 10286 Boca Cir

City Naples State FL Zip Code 34109

FEC ID number of contributing federal political committee. **C**

Name of Employer Old Naples Pub Occupation Server

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : SA11AI.7720

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

940.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Mark Blakemore

Mailing Address 10286 Boca Cir

City Naples State FL Zip Code 34109

FEC ID number of contributing federal political committee. **C**

Name of Employer Old Naples Pub Occupation Server

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **290.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.7721

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mark Blakemore

Mailing Address 10286 Boca Cir

City Naples State FL Zip Code 34109

FEC ID number of contributing federal political committee. **C**

Name of Employer Old Naples Pub Occupation Server

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **340.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11AI.7722

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Jana Blanton

Mailing Address 3901 Versailles Dr.

City Tampa State FL Zip Code 33634

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.7723

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
L.D. Blanton

Mailing Address 12401 North 22nd Street
Apt. D-105

City Tampa State FL Zip Code 33612

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2012

Transaction ID : SA11AI.7725

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gary Brown

Mailing Address 6105 Hickory Valley Rd.

City Nashville State TN Zip Code 37206

FEC ID number of contributing federal political committee. **C**

Name of Employer CMG Life Services, Inc. Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11AI.7730

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
George Brown

Mailing Address 4431 Plumage Ct.

City Bonita Springs State FL Zip Code 34134

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.7732

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
George Brown

Mailing Address 4431 Plumage Ct.

City Bonita Springs	State FL	Zip Code 34134
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : SA11AI.7733

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gregory Cain

Mailing Address 690 Grand Rapids Blvd

City Naples	State FL	Zip Code 34120
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FEC ID number of contributing federal political committee. **C**

Name of Employer EXEL	Occupation Executive
--------------------------	-------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11AI.7737

Amount of Each Receipt this Period
450.00

C. Full Name (Last, First, Middle Initial)
Gregory Cain

Mailing Address 690 Grand Rapids Blvd

City Naples	State FL	Zip Code 34120
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FEC ID number of contributing federal political committee. **C**

Name of Employer EXEL	Occupation Executive
--------------------------	-------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7739

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Jamie Cain		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012
Mailing Address 690 Grand Rapids Blvd		Transaction ID : SA11AI.7738
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2075.00
Name of Employer Retired	Occupation Executive	Election Cycle-to-Date 2500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Sheryl Calish		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2012
Mailing Address 188 GULFSTREAM STREET		Transaction ID : SA11AI.7741
City Marco Island	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer NA	Occupation NA	Election Cycle-to-Date 300.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Matthew Clarke		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2012
Mailing Address 1900 Curry Ford Road		Transaction ID : SA11AI.7748
City Orlando	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NA	Occupation NA	Election Cycle-to-Date 350.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	2625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) Barbara Clinton		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 3137 Andorra Court		Transaction ID : SA11AI.7749
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Edwin Cordero		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 840 111th Ave. N. Suite 13		Transaction ID : SA11AI.7752
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Owner	Occupation Cornerstone Home Health Care	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Katherine Coudriet		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2012
Mailing Address 3734 Rachel Lane		Transaction ID : SA11AI.7755
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Anthony D'Agostino		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 371 Banyan Road		Transaction ID : SA11AI.7761
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Physician	Occupation Self-employed	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. Stuart Egerton		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 2640 Half Moon Walk		Transaction ID : SA11AI.7787
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) C. MK Eickhoff-Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2012
Mailing Address 4021 Gulf Shore Blvd N # 1905		Transaction ID : SA11AI.7788
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 475.00
Name of Employer Cease Smoking Coach	Occupation Stay-Quit	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 475.00	

SUBTOTAL of Receipts This Page (optional).....	1075.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
MK Eickhoff-Smith

Mailing Address 4021 Gulf Shore Blvd N
1905

City Naples State FL Zip Code 34103

FEC ID number of contributing federal political committee. **C**

Name of Employer Cease Smoking Coach Occupation Stay-Quit

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2475.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2012

Transaction ID : SA11AI.7789

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Jennifer Euler

Mailing Address 38 Madison Drive

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Closing Manager Occupation Heights Title Services, LLC

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 10 / 2012

Transaction ID : SA11AI.7792

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jennifer Euler

Mailing Address 38 Madison Drive

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Closing Manager Occupation Heights Title Services, LLC

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.7793

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Karen Flaugh		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2012
Mailing Address 1390 Quintara Ct.		Transaction ID : SA11AI.7800
City Marco Island	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 415.00
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 415.00	

Full Name (Last, First, Middle Initial) B. Keith Flaugh		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012
Mailing Address 1390 Quintara Ct.		Transaction ID : SA11AI.7798
City Marco Island	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Keith Flaugh		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2012
Mailing Address 1390 Quintara Ct.		Transaction ID : SA11AI.7801
City Marco Island	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

SUBTOTAL of Receipts This Page (optional).....	965.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Keith Flaugh		Date of Receipt MM / DD / YYYY 06 / 12 / 2012
Mailing Address 1390 Quintara Ct.		Transaction ID : SA11AI.7802
City Marco Island	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) B. Christina Forbes		Date of Receipt MM / DD / YYYY 05 / 30 / 2012
Mailing Address 3736 Rachel Lane		Transaction ID : SA11AI.7803
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Accessories Etc Inc	Occupation Interior Design	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) C. Christina Forbes		Date of Receipt MM / DD / YYYY 06 / 15 / 2012
Mailing Address 3736 Rachel Lane		Transaction ID : SA11AI.7804
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Accessories Etc Inc	Occupation Interior Design	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1850.00	

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Gerald (Jerry) Francis

Mailing Address 1370 Quintara Ct.

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2012

Transaction ID : SA11AI.7810

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Nancy Francis

Mailing Address 1370 Quintara Ct.

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2012

Transaction ID : SA11AI.7809

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Joan Hacquebord

Mailing Address 4802 Wynwood Dr.

City Tampa State FL Zip Code 33615

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2012

Transaction ID : SA11AI.7828

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Carl Haeussler

Mailing Address 514 N. Barfield Drive

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11AI.7830

Amount of Each Receipt this Period
 200.00

B. Full Name (Last, First, Middle Initial)
Robert Harden

Mailing Address 8787 Bay Colony Drive #1504

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Occupation Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 24 / 2012

Transaction ID : SA11AI.7836

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Robert Harden

Mailing Address 8787 Bay Colony Drive #1504

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Occupation Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7837

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Randy Harris

Mailing Address 1090 S. Collier Blvd
Apt. 514

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Previous Business Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 06 / 2012

Transaction ID : SA11AI.7840

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James Heffner

Mailing Address 454 Eden Bay Drive

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7841

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Brad Heiges

Mailing Address 1013 Fountain Run

City Naples State FL Zip Code 34119

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2012

Transaction ID : SA11AI.7842

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
L Michael Howell

Mailing Address 8070 Glen Abbey Circle

City State Zip Code
Ft Myers FL 33912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Surgeon Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : SA11AI.7852

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Karen Huesing

Mailing Address 7307 Waterpoint Ln.

City State Zip Code
Cincinnati OH 45255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 26 / 2012

Transaction ID : SA11AI.7853

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Brian Hunter

Mailing Address 9788 Silvercreek Ct

City State Zip Code
Estero FL 33928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Living Word Family Church Administration and Maintenance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
245.39

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 23 / 2012

Transaction ID : SA11AI.7858

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Harriet Jones		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2012	
Mailing Address Harriet Jones		Transaction ID : SA11AI.7862	
City Naples	State FL	Zip Code 34102	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Richard Kaufman		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2012	
Mailing Address 1944 Princess Court		Transaction ID : SA11AI.7865	
City Naples	State FL	Zip Code 34110	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00	
Name of Employer NA	Occupation NA		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00		

Full Name (Last, First, Middle Initial) C. Wade Keller		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2012	
Mailing Address 440 Seaview Ct #1012		Transaction ID : SA11AI.7867	
City Marco Island	State FL	Zip Code 34145	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer Self	Occupation ghostwrite, edit, design, publish		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400.00		

SUBTOTAL of Receipts This Page (optional).....	2675.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Thaddeus Kirkpatrick

Mailing Address 420 Widgeon Pointe

City Naples State FL Zip Code 34105

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012

Transaction ID : SA11AI.7869

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Karl Kropp

Mailing Address 3187 River Grove Cr.

City Fort Myers State FL Zip Code 33905

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7873

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Randy Kurtz

Mailing Address 1055 Crosspointe Drive

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Home builder

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7876

Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Gayla Lees

Mailing Address 7602 Deer Path Lane

City Land O' Lakes State FL Zip Code 34637

FEC ID number of contributing federal political committee. **C**

Name of Employer The Real Connection, Inc. Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **685.90**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 01 / 2012

Transaction ID : SA11AI.7887

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Clifton Lees, Sr.

Mailing Address P.O. Box 647

City Homosassa State FL Zip Code 34487

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11AI.7888

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Larry Lohman

Mailing Address 5941 Paradise Circle

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11AI.7891

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Larry Lohman

Mailing Address 5941 Paradise Circle

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.7892

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Larry Lohman

Mailing Address 5941 Paradise Circle

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 12 / 2012

Transaction ID : SA11AI.7893

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Michael Lyster

Mailing Address 5931 Barclay Ln

City Naples State FL Zip Code 34110

FEC ID number of contributing federal political committee. **C**

Name of Employer Nuclear Energy Consultant Occupation Self

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.7897

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Thomas Macchia

Mailing Address 5645 Eleuthera Way

City Naples State FL Zip Code 34119

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Union Official

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7898

Amount of Each Receipt this Period
 300.00

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
Leslie Magin

Mailing Address 1801 Gulfshore Blvd. N. #802

City Naples State FL Zip Code 34102

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2012

Transaction ID : SA11AI.7902

Amount of Each Receipt this Period
 200.00

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Carol Manning

Mailing Address 2352 Magnolia Lane, Apt. 4

City Naples State FL Zip Code 34112

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2012

Transaction ID : SA11AI.7903

Amount of Each Receipt this Period
 50.00

Amount of Each Receipt this Period
 1050.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
James McGovern
 Mailing Address 6058 SE Grand Cay Court
 City State Zip Code
 Stuart FL 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Police Leutenant Retired
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date
 265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012
Transaction ID : SA11AI.7907
 Amount of Each Receipt this Period
 240.00

B. Full Name (Last, First, Middle Initial)
Charles McMunn
 Mailing Address 1415 Panther Lane
 Suite 246
 City State Zip Code
 Naples FL 34109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CEO/Owner Tricam Industries
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : SA11AI.7910
 Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Jasper Medici
 Mailing Address PO Box 11392
 City State Zip Code
 Naples FL 34101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012
Transaction ID : SA11AI.7913
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

1240.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Jasper Medici		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address PO Box 11392		Transaction ID : SA11AI.7914
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00	

Full Name (Last, First, Middle Initial) B. Laken Mitchell		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 4453 Brynwood Dr.		Transaction ID : SA11AI.7916
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 650.00
Name of Employer CMG Life Services, Inc.	Occupation Attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1650.00	

Full Name (Last, First, Middle Initial) C. Thomas Moran		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2012
Mailing Address 340 West Street		Transaction ID : SA11AI.7919
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	3300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Stephen Myking

Mailing Address 415 10th Ave. S., No. 8

City: Naples State: FL Zip Code: 34102

FEC ID number of contributing federal political committee: **C**

Name of Employer: Attorney Occupation: Self

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 14 / 2012

Transaction ID : SA11AI.7922

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Stephen Myking

Mailing Address 415 10th Ave. S., No. 8

City: Naples State: FL Zip Code: 34102

FEC ID number of contributing federal political committee: **C**

Name of Employer: Attorney Occupation: Self

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 17 / 2012

Transaction ID : SA11AI.7923

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Bruce Novark

Mailing Address 1220 Ember Ct.

City: Marco Island State: FL Zip Code: 34145-5804

FEC ID number of contributing federal political committee: **C**

Name of Employer: Surgeon Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 06 / 30 / 2012

Transaction ID : SA11AI.7927

Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Denis Olson

Mailing Address **PO Box 2071**

City **Fargo** State **ND** Zip Code **58107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Self**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 13 / 2012

Transaction ID : SA11AI.7931

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
David Patton

Mailing Address **660 Via Mezner #401**

City **Naples** State **FL** Zip Code **34108-6589**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2012

Transaction ID : SA11AI.7937

Amount of Each Receipt this Period
550.00

C. Full Name (Last, First, Middle Initial)
Roberta Patton

Mailing Address **660 Via Mezner #401**

City **Naples** State **FL** Zip Code **34108-6589**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11AI.7936

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Roberta Patton

Mailing Address 660 Via Mezner #401

City Naples State FL Zip Code 34108-6589

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2012

Transaction ID : SA11A1.7938

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Clarice Porter

Mailing Address 1550 Redwood Avenue

City Boulder State CO Zip Code 80305

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Psychotherapist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2012

Transaction ID : SA11A1.7944

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
John Porter

Mailing Address 27031 Driftwood Dr.

City Bonita Springs State FL Zip Code 34135

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Chueys Tacos

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
277.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2012

Transaction ID : SA11A1.7945

Amount of Each Receipt this Period
277.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3077.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. John Porter		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2012
Mailing Address 27031 Driftwood Dr.		Transaction ID : SA11AI.7946
City Bonita Springs	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2450.00
Name of Employer Self	Occupation Chueys Tacos	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2727.00	

Full Name (Last, First, Middle Initial) B. Robert Porter		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2012
Mailing Address 405 North Briggs Av, Apt. 115		Transaction ID : SA11AI.7947
City Sarasota	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 327.00
Name of Employer IT	Occupation Star2Star Communications	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 327.00	

Full Name (Last, First, Middle Initial) C. Robert Porter		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2012
Mailing Address 405 North Briggs Av, Apt. 115		Transaction ID : SA11AI.7948
City Sarasota	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2173.00
Name of Employer IT	Occupation Star2Star Communications	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	4950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Thomas Porter

Mailing Address 741 Robinhood Dr.

City Maitland	State FL	Zip Code 32751
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FEC ID number of contributing federal political committee. **C**

Name of Employer Actuary	Occupation Hanover Life
-----------------------------	----------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
604.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012

Transaction ID : SA11AI.7949

Amount of Each Receipt this Period
604.00

B. Full Name (Last, First, Middle Initial)
Ben Post

Mailing Address 1076 Grand Isle Dr.

City Naples	State FL	Zip Code 34108
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FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation NA
------------------------	------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11AI.7950

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Donald Rauch

Mailing Address 1715 Persimmon Drive

City Naples	State FL	Zip Code 34109
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FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation NA
------------------------	------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.7958

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1604.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Shawn Riedel		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2012
Mailing Address 9608 Catalina St		Transaction ID : SA11AI.7964
City Overland Park	State KS	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ASP	Occupation Child Care Provider	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. G. Stephen Robins		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2012
Mailing Address 8473 Bay Colony Dr. #1702		Transaction ID : SA11AI.7966
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) C. Gilbert Sanabria		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 14 / 2012
Mailing Address 2730 8th Avenue NE		Transaction ID : SA11AI.7973
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer GST Pro DJ Productions LLC	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1375.00	

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Gilbert Sanabria		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address 2730 8th Avenue NE		Transaction ID : SA11AI.7974
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer GST Pro DJ Productions LLC	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00	

Full Name (Last, First, Middle Initial) B. Gilbert Sanabria		Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 2730 8th Avenue NE		Transaction ID : SA11AI.7975
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer GST Pro DJ Productions LLC	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2125.00	

Full Name (Last, First, Middle Initial) C. Gilbert Sanabria		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 2730 8th Avenue NE		Transaction ID : SA11AI.7976
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer GST Pro DJ Productions LLC	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2425.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) Edward Scanlon		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address 8473 Bay Colony Dr. #1604		Transaction ID : SA11AI.7980
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) M.G. Schulze		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2012
Mailing Address 8500 Normandale Lake Blvd. Suite 1750		Transaction ID : SA11AI.7981
City Minneapolis	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Francis Schwerin		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 15 / 2012
Mailing Address 489 Cypress Way E		Transaction ID : SA11AI.7982
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Physician	Occupation Cardio-imaging of Naples, Inc.	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) Kim Scola		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2012
Mailing Address 8911 Brighton Lane		Transaction ID : SA11AI.7983
City Bonita Springs	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Collins Dupont	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Aaron Sevigny		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 24 / 2012
Mailing Address 1629 Serenity Circle		Transaction ID : SA11AI.7985
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Investing	Occupation Self	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Dale Simonson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 07 / 2012
Mailing Address 3400 Gulf Shore Blvd. N, Apt O-1		Transaction ID : SA11AI.7990
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer GST Pro DJ Production, LLC	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A.J. Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2012
Mailing Address 4021 Gulf Shore Blvd N # 1905		Transaction ID : SA11AI.7993
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cease Smoking Coach	Occupation Stay-Quit	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) A.J. Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 4021 Gulf Shore Blvd N # 1905		Transaction ID : SA11AI.7994
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Cease Smoking Coach	Occupation Stay-Quit	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Jerry Smith		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 09 / 2012
Mailing Address 4638 Chippendale Dr.		Transaction ID : SA11AI.7991
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Raymond Staffeldt

Mailing Address 7517 Cordoba Circle

City Naples State FL Zip Code 34109

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11AI.7997

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Kathleen Stassen

Mailing Address 5000 France Ave. S. #43

City Edina State MN Zip Code 55410

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation none

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 23 / 2012

Transaction ID : SA11AI.8001

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
William Thomas

Mailing Address 1175 Littleneck Court

City Naples State FL Zip Code 34102

FEC ID number of contributing federal political committee. **C**

Name of Employer TJ Albert Occupation Orthodontist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11AI.8009

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2150.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Frank Tuttle

Mailing Address 26991 Wyndhurst Court

City State Zip Code
Bonita Springs FL 34134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2012

Transaction ID : SA11AI.8015

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John Tymann

Mailing Address 8990 Bay Colony Dr.
#1201

City State Zip Code
Naples FL 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11AI.8016

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lucille Tymann

Mailing Address 8990 Bay Colony Dr.
#1201

City State Zip Code
Naples FL 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11AI.8017

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Ty Vigil		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2012	
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8023	
City Naples	State FL	Zip Code 34120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer The Promised Land Property Services, L	Occupation Association Management		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00		

Full Name (Last, First, Middle Initial) B. Ty Vigil		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2012	
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8024	
City Naples	State FL	Zip Code 34120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.10	
Name of Employer The Promised Land Property Services, L	Occupation Association Management		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 276.10		

Full Name (Last, First, Middle Initial) C. Ty Vigil		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2012	
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8025	
City Naples	State FL	Zip Code 34120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.54	
Name of Employer The Promised Land Property Services, L	Occupation Association Management		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 320.64		

SUBTOTAL of Receipts This Page (optional).....	120.64
TOTAL This Period (last page this line number only).....	120.64

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) Ty Vigil		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8026
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 248.59
Name of Employer The Promised Land Property Services, L	Occupation Association Management	Election Cycle-to-Date 569.23
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Ty Vigil		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8027
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.97
Name of Employer The Promised Land Property Services, L	Occupation Association Management	Election Cycle-to-Date 632.20
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Ty Vigil		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 19 / 2012
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8030
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.91
Name of Employer The Promised Land Property Services, L	Occupation Association Management	Election Cycle-to-Date 666.11
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	345.47
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial) Ty Vigil		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8031
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer The Promised Land Property Services, L	Occupation Association Management	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 686.11	

B. Full Name (Last, First, Middle Initial) Ty Vigil		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8032
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 59.36
Name of Employer The Promised Land Property Services, L	Occupation Association Management	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 745.47	

C. Full Name (Last, First, Middle Initial) Ty Vigil		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 180 33rd Avenue NE		Transaction ID : SA11AI.8033
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.19
Name of Employer The Promised Land Property Services, L	Occupation Association Management	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 819.66	

SUBTOTAL of Receipts This Page (optional).....	153.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 78
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
Maggie Wasmer

Mailing Address 2320 14th St N

City Naples State FL Zip Code 34103

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 30 / 2012

Transaction ID : SA11AI.8034

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Alice Wolf

Mailing Address 1221 Gulfshore Blvd. N. #801

City Naples State FL Zip Code 34102-4916

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 11 / 2012

Transaction ID : SA11AI.8041

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Alice Wolf

Mailing Address 1221 Gulfshore Blvd. N. #801

City Naples State FL Zip Code 34102-4916

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11AI.8042

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1450.00

59945.66

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 78
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
GOOOH NATIONAL COMMITTEE

Mailing Address 181 RIO GABRIEL DR

City LIBERTY HILL State TX Zip Code 78642

FEC ID number of contributing federal political committee. **C** C00441568

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA11C.8056

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 78
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1343.02

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		08		2012

Transaction ID : SA11D.7767

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1406.51

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		11		2012

Transaction ID : SA11D.7768

Amount of Each Receipt this Period
63.49

C. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1525.36

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		21		2012

Transaction ID : SA11D.7769

Amount of Each Receipt this Period
118.85

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

187.34

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 78
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) BYRON Lowell DONALDS		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 21 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Transaction ID : SA11D.7770
City NAPLES	State FL	
FEC ID number of contributing federal political committee. C H2FL14186		Amount of Each Receipt this Period 6.36
Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1531.72	

Full Name (Last, First, Middle Initial) BYRON Lowell DONALDS		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 21 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Transaction ID : SA11D.7771
City NAPLES	State FL	
FEC ID number of contributing federal political committee. C H2FL14186		Amount of Each Receipt this Period 41.77
Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1573.49	

Full Name (Last, First, Middle Initial) BYRON Lowell DONALDS		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Transaction ID : SA11D.7772
City NAPLES	State FL	
FEC ID number of contributing federal political committee. C H2FL14186		Amount of Each Receipt this Period 26.39
Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1599.88	

SUBTOTAL of Receipts This Page (optional).....	74.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 78
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1658.39

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : SA11D.7773

Amount of Each Receipt this Period
58.51

B. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1671.11

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : SA11D.7774

Amount of Each Receipt this Period
12.72

C. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1726.89

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2012

Transaction ID : SA11D.7775

Amount of Each Receipt this Period
55.78

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

127.01

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 78
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H2FL14186

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1854.09

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		14		2012

Transaction ID : SA11D.7776

Amount of Each Receipt this Period
127.20

B. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H2FL14186

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1892.62

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		14		2012

Transaction ID : SA11D.7777

Amount of Each Receipt this Period
38.53

C. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** H2FL14186

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2003.81

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2012

Transaction ID : SA11D.7778

Amount of Each Receipt this Period
111.19

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

276.92

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 78
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2023.77

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2012

Transaction ID : SA11D.7779

Amount of Each Receipt this Period
19.96

B. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2219.16

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2012

Transaction ID : SA11D.7780

Amount of Each Receipt this Period
195.39

C. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES	State FL	Zip Code 34110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer CMG Life Services, Inc.	Occupation Portfolio Manager
---	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2271.61

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2012

Transaction ID : SA11D.7781

Amount of Each Receipt this Period
52.45

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

267.80

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 78
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Full Name (Last, First, Middle Initial)
BYRON Lowell DONALDS

Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City State Zip Code
NAPLES FL 34110

FEC ID number of contributing federal political committee. **C H2FL14186**

Name of Employer Occupation
CMG Life Services, Inc. Portfolio Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2288.54

Date of Receipt
 M M / D D / Y Y Y Y
06 24 2012

Transaction ID : SA11D.7782

Amount of Each Receipt this Period
16.93

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

16.93

950.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Abacus Enterprises of Tampa, Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 2532 Lake Ellen Lane		Amount of Each Disbursement this Period 586.28
City Tampa	State FL Zip Code 33618	
Purpose of Disbursement Marketing materials	Candidate Name	Transaction ID : SB17.5995
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Abacus Enterprises of Tampa, Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 2532 Lake Ellen Lane		Amount of Each Disbursement this Period 313.11
City Tampa	State FL Zip Code 33618	
Purpose of Disbursement Marketing materials	Candidate Name	Transaction ID : SB17.6057
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Abacus Enterprises of Tampa, Inc		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 2532 Lake Ellen Lane		Amount of Each Disbursement this Period 427.86
City Tampa	State FL Zip Code 33618	
Purpose of Disbursement Marketing materials	Candidate Name	Transaction ID : SB17.6156
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1327.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 78		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Alita Grafx		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 5608 Mayfield Rd.		Amount of Each Disbursement this Period 262.82 Transaction ID : SB17.6035
City Lyndhurst	State OH Zip Code 44124	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alita Grafx		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 5608 Mayfield Rd.		Amount of Each Disbursement this Period 544.01 Transaction ID : SB17.6036
City Lyndhurst	State OH Zip Code 44124	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Alita Grafx		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 5608 Mayfield Rd.		Amount of Each Disbursement this Period 87.05 Transaction ID : SB17.6132
City Lyndhurst	State OH Zip Code 44124	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	893.88
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 78			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Alita Grafx		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 5608 Mayfield Rd.		Amount of Each Disbursement this Period 889.86 Transaction ID : SB17.6152
City Lyndhurst	State OH	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alita Grafx		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 5608 Mayfield Rd.		Amount of Each Disbursement this Period 285.38 Transaction ID : SB17.6153
City Lyndhurst	State OH	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Alita Grafx		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address 5608 Mayfield Rd.		Amount of Each Disbursement this Period 142.69 Transaction ID : SB17.6169
City Lyndhurst	State OH	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1317.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 78		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Artype, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 3530 Work Drive		Amount of Each Disbursement this Period 1674.91 Transaction ID : SB17.6087
City Fort Myers	State FL	
Zip Code 33916	Purpose of Disbursement Signage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Brian Hunter		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 9788 Silvercreek Ct.		Amount of Each Disbursement this Period 506.97 Transaction ID : SB17.6005
City Estero	State FL	
Zip Code 33928	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Brian Hunter		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 9788 Silvercreek Ct.		Amount of Each Disbursement this Period 172.07 Transaction ID : SB17.6094
City Estero	State FL	
Zip Code 33928	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2353.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Brian Hunter		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address 9788 Silvercreek Ct.		Amount of Each Disbursement this Period 81.48
City Estero	State FL	
Zip Code 33928	Purpose of Disbursement Office Supplies	Transaction ID : SB17.6129
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cape Coral Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 2051 Cape Coral Pkwy E		Amount of Each Disbursement this Period 275.00
City Cape Coral	State FL	
Zip Code 33904	Purpose of Disbursement Event	Transaction ID : SB17.6144
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. CMG Life Services Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 1016 Collier Center Way, Suite 200		Amount of Each Disbursement this Period 615.00
City Naples	State FL	
Zip Code 34110	Purpose of Disbursement Office Furniture	Transaction ID : SB17.6006
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	971.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Conric Holdings LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 8211 College Parkway, Suite 130		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.6007
City Ft. Myers	State FL	
Zip Code 33919	Purpose of Disbursement PR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Conric Holdings LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 8211 College Parkway, Suite 130		Amount of Each Disbursement this Period 175.00 Transaction ID : SB17.6095
City Ft. Myers	State FL	
Zip Code 33919	Purpose of Disbursement PR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Conric Holdings LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address 8211 College Parkway, Suite 130		Amount of Each Disbursement this Period 775.00 Transaction ID : SB17.6170
City Ft. Myers	State FL	
Zip Code 33919	Purpose of Disbursement PR	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 78		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Curve Hosting

Full Name (Last, First, Middle Initial)
Mailing Address 9696 Bonita Beach Rd.

City Bonita Springs State FL Zip Code 34135

Purpose of Disbursement IT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 01 / 2012

Amount of Each Disbursement this Period: 375.00

Transaction ID : SB17.6134

B. BYRON Lowell DONALDS

Full Name (Last, First, Middle Initial)
Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES State FL Zip Code 34110

Purpose of Disbursement In-kind - Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: FL District: 19

Date of Disbursement: 04 / 11 / 2012

Amount of Each Disbursement this Period: 63.49

Transaction ID : SB17.5990

C. BYRON Lowell DONALDS

Full Name (Last, First, Middle Initial)
Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES State FL Zip Code 34110

Purpose of Disbursement In-kind - Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: FL District: 19

Date of Disbursement: 04 / 21 / 2012

Amount of Each Disbursement this Period: 118.85

Transaction ID : SB17.6008

SUBTOTAL of Disbursements This Page (optional) 557.34

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 78		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 6.36
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Transaction ID : SB17.6009
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 19		

Full Name (Last, First, Middle Initial) B. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 41.77
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Transaction ID : SB17.6010
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 19		

Full Name (Last, First, Middle Initial) C. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 26.39
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Transaction ID : SB17.6011
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 19		

SUBTOTAL of Disbursements This Page (optional).....	74.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. BYRON Lowell DONALDS

Full Name (Last, First, Middle Initial)
Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES State FL Zip Code 34110

Purpose of Disbursement In-kind - Printing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: FL District: 19

Date of Disbursement: 04 / 24 / 2012

Amount of Each Disbursement this Period: 58.51

Transaction ID : SB17.6028

B. BYRON Lowell DONALDS

Full Name (Last, First, Middle Initial)
Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES State FL Zip Code 34110

Purpose of Disbursement In-kind - Printing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: FL District: 19

Date of Disbursement: 04 / 24 / 2012

Amount of Each Disbursement this Period: 12.72

Transaction ID : SB17.6029

C. BYRON Lowell DONALDS

Full Name (Last, First, Middle Initial)
Mailing Address 11216 TAMIAMI TRAIL NORTH #132

City NAPLES State FL Zip Code 34110

Purpose of Disbursement In-kind - Printing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: FL District: 19

Date of Disbursement: 05 / 09 / 2012

Amount of Each Disbursement this Period: 55.78

Transaction ID : SB17.6101

SUBTOTAL of Disbursements This Page (optional) 127.01

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 78		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 276.92 Transaction ID : SB17.6108
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: FL District: 19	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 38.53 Transaction ID : SB17.6109
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: FL District: 19	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 111.19 Transaction ID : SB17.6124
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: FL District: 19	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	276.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 19.96 Transaction ID : SB17.6148
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: FL District: 19	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 195.39 Transaction ID : SB17.6150
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: FL District: 19	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 52.45 Transaction ID : SB17.6159
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: FL District: 19	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	267.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 78		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. BYRON Lowell DONALDS		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 11216 TAMIAMI TRAIL NORTH #132		Amount of Each Disbursement this Period 16.93 Transaction ID : SB17.6165
City NAPLES	State FL	
Zip Code 34110	Purpose of Disbursement In-kind - Printing	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 19	

Full Name (Last, First, Middle Initial) B. Easy Street Moving		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 209 HARTLEY AVE		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.5997
City Marco Island	State FL	
Zip Code 34145	Purpose of Disbursement Moving	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Karen Flaugh		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2012
Mailing Address 1390 Quintara Ct.		Amount of Each Disbursement this Period 415.00 Transaction ID : SB17.6139
City Marco Island	State FL	
Zip Code 34145	Purpose of Disbursement In-kind - Event - Food & Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	781.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Germain Arena		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012
Mailing Address 11000 Everblades Pkwy		Amount of Each Disbursement this Period 360.00
City Estero	State FL	
Zip Code 33928	Purpose of Disbursement Event	Transaction ID : SB17.5999
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Just Buttons		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 59 School Ground Road Unit 7		Amount of Each Disbursement this Period 175.00
City Branford	State CT	
Zip Code 06405	Purpose of Disbursement Promotional items	Transaction ID : SB17.6180
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lee Pitts Live		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 8765 Azalea Court, Suite 103		Amount of Each Disbursement this Period 800.00
City Tamarac	State FL	
Zip Code 33321	Purpose of Disbursement Advertising	Transaction ID : SB17.6088
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Lee Pitts Live		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address 8765 Azalea Court, Suite 103		Amount of Each Disbursement this Period 30.00
City Tamarac State FL Zip Code 33321	Purpose of Disbursement Advertising	
Candidate Name	Category/Type	Transaction ID : SB17.6158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Macchia		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 5645 Eleuthera Way		Amount of Each Disbursement this Period 300.00
City Naples State FL Zip Code 34119	Purpose of Disbursement In-kind - Equipment rental	
Candidate Name	Category/Type	Transaction ID : SB17.6179
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Media Lab		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 5905 Hampton Oaks Pkwy D200		Amount of Each Disbursement this Period 445.52
City Tampa State FL Zip Code 33610	Purpose of Disbursement Printing	
Candidate Name	Category/Type	Transaction ID : SB17.5987
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	775.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Media Lab		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 5905 Hampton Oaks Pkwy D200		Amount of Each Disbursement this Period 145.87
City Tampa State FL Zip Code 33610	Category/Type	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.6122
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 5066 Airport Pulling Road		Amount of Each Disbursement this Period 450.49
City Naples State FL Zip Code 34105	Category/Type	
Purpose of Disbursement Printer	Candidate Name	Transaction ID : SB17.6140
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 788.89
City San Francisco State CA Zip Code 94105	Category/Type	
Purpose of Disbursement Credit card fees	Candidate Name	Transaction ID : SB17.6174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1385.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 78			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Political Gravity		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 2500 Legacy Dr. #206		Amount of Each Disbursement this Period 672.50 Transaction ID : SB17.6131
City Frisco State TX Zip Code 75034	Purpose of Disbursement Voter data	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Political Gravity		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 2500 Legacy Dr. #206		Amount of Each Disbursement this Period 672.50 Transaction ID : SB17.6145
City Frisco State TX Zip Code 75034	Purpose of Disbursement Voter data	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Clarice Porter		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 1550 Redwood Avenue		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5977
City Boulder State CO Zip Code 80305	Purpose of Disbursement In-kind - Office space	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3845.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 78		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. John Porter		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012
Mailing Address 27031 Driftwood Dr.		Amount of Each Disbursement this Period 277.00 Transaction ID : SB17.5978
City Bonita Springs	State FL	
Zip Code 34135	Purpose of Disbursement In-kind - Office space	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. John Porter		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 27031 Driftwood Dr.		Amount of Each Disbursement this Period 2223.00 Transaction ID : SB17.6063
City Bonita Springs	State FL	
Zip Code 34135	Purpose of Disbursement In-kind - Office space	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Robert Porter		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 405 North Briggs Av, Apt. 115		Amount of Each Disbursement this Period 554.00 Transaction ID : SB17.6064
City Sarasota	State FL	
Zip Code 34237	Purpose of Disbursement In-kind - Office space	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3054.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Robert Porter		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 405 North Briggs Av, Apt. 115		Amount of Each Disbursement this Period 1946.00
City Sarasota State FL Zip Code 34237	Purpose of Disbursement In-kind - Office space	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.6176
State: District:		

Full Name (Last, First, Middle Initial) B. Thomas Porter		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 741 Robinhood Dr.		Amount of Each Disbursement this Period 831.00
City Maitland State FL Zip Code 32751	Purpose of Disbursement In-kind - Office space	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.6177
State: District:		

Full Name (Last, First, Middle Initial) c. Premier Trolleys		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 4280 Gulf Shore Boulevard North		Amount of Each Disbursement this Period 378.00
City Naples State FL Zip Code 34103	Purpose of Disbursement Event	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.6037
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Premier Trolleys		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 4280 Gulf Shore Boulevard North		Amount of Each Disbursement this Period 378.00
City Naples	State FL	
Zip Code 34103	Purpose of Disbursement Event	Transaction ID : SB17.6146
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Preston Lees		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address 875 White Swan Dr. #102		Amount of Each Disbursement this Period 200.00
City Tampa	State FL	
Zip Code 33614	Purpose of Disbursement Web design	Transaction ID : SB17.6082
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Preston Lees		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 875 White Swan Dr. #102		Amount of Each Disbursement this Period 500.00
City Tampa	State FL	
Zip Code 33614	Purpose of Disbursement Web design	Transaction ID : SB17.6141
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1078.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Rapid Print		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 12311 White Pine Lane		Amount of Each Disbursement this Period 291.69
City Ft. Myers	State FL	
Purpose of Disbursement Printing	Category/ Type	
Candidate Name	Transaction ID : SB17.6038	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rebecca Franks		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 761 10th Ave N.W.		Amount of Each Disbursement this Period 209.50
City Naples	State FL	
Purpose of Disbursement Postage	Category/ Type	
Candidate Name	Transaction ID : SB17.6004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gilbert Sanabria		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address 2730 8th Avenue NE		Amount of Each Disbursement this Period 225.00
City Naples	State FL	
Purpose of Disbursement In-kind - Equipment rental	Category/ Type	
Candidate Name	Transaction ID : SB17.5993	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	726.19
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 78			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Gilbert Sanabria		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address 2730 8th Avenue NE		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.6030
City Naples	State FL	
Purpose of Disbursement In-kind - Equipment rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Gilbert Sanabria		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 2730 8th Avenue NE		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.6166
City Naples	State FL	
Purpose of Disbursement In-kind - Equipment rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Gilbert Sanabria		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 2730 8th Avenue NE		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.6172
City Naples	State FL	
Purpose of Disbursement In-kind - Equipment rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 78			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

A. Sea Salt of Naples

Full Name (Last, First, Middle Initial)
Mailing Address 1186 3rd Street South

City Naples State FL Zip Code 34102

Purpose of Disbursement
Event - Food & Beverage

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
06 / 11 / 2012

Amount of Each Disbursement this Period
500.00

Transaction ID : SB17.6149

B. Seminole Club of Naples, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 111732

City Naples State FL Zip Code 34108

Purpose of Disbursement
Event

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
05 / 15 / 2012

Amount of Each Disbursement this Period
250.00

Transaction ID : SB17.6111

c. Staples

Full Name (Last, First, Middle Initial)
Mailing Address 13585 N. Tamiami Trail Ste 12

City Naples State FL Zip Code 34110

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 02 / 2012

Amount of Each Disbursement this Period
62.54

Transaction ID : SB17.5979

SUBTOTAL of Disbursements This Page (optional)..... 812.54

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 78			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012
Mailing Address 13585 N. Tamiami Trail Ste 12		Amount of Each Disbursement this Period 96.45 Transaction ID : SB17.5980
City Naples	State FL	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 13585 N. Tamiami Trail Ste 12		Amount of Each Disbursement this Period 10.23 Transaction ID : SB17.5986
City Naples	State FL	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 13585 N. Tamiami Trail Ste 12		Amount of Each Disbursement this Period 13.77 Transaction ID : SB17.5994
City Naples	State FL	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	96.45
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 13585 N. Tamiami Trail Ste 12		Amount of Each Disbursement this Period 13.45 Transaction ID : SB17.6001
City Naples	State FL	
Zip Code 34110	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 13585 N. Tamiami Trail Ste 12		Amount of Each Disbursement this Period 100.07 Transaction ID : SB17.6125
City Naples	State FL	
Zip Code 34110	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 13585 N. Tamiami Trail Ste 12		Amount of Each Disbursement this Period 17.41 Transaction ID : SB17.6126
City Naples	State FL	
Zip Code 34110	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	130.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. StickerGiant.com Inc			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012	
Mailing Address P.O. Box 301			Amount of Each Disbursement this Period 259.39	
City Hygiene	State CO	Zip Code 80533	Transaction ID : SB17.5991	
Purpose of Disbursement Promotional Items	Category/ Type			
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. StickerGiant.com Inc			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012	
Mailing Address P.O. Box 301			Amount of Each Disbursement this Period 510.31	
City Hygiene	State CO	Zip Code 80533	Transaction ID : SB17.5996	
Purpose of Disbursement Promotional Items	Category/ Type			
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. StickerGiant.com Inc			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012	
Mailing Address P.O. Box 301			Amount of Each Disbursement this Period 230.29	
City Hygiene	State CO	Zip Code 80533	Transaction ID : SB17.6000	
Purpose of Disbursement Promotional Items	Category/ Type			
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	999.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Sunshine State Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 1180 8th Ave. West Suite 259		Amount of Each Disbursement this Period 3500.00
City Palmetto State FL Zip Code 34221	Purpose of Disbursement Consulting	
Candidate Name	Category/Type	Transaction ID : SB17.6013
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. SWFL Hispanic Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 10051 McGregor Boulevard Suite 204		Amount of Each Disbursement this Period 130.00
City Ft. Myers State FL Zip Code 33919	Purpose of Disbursement Event	
Candidate Name	Category/Type	Transaction ID : SB17.6143
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. The Club at Sterling Oaks		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 822 Sterling Oaks Blvd.		Amount of Each Disbursement this Period 292.54
City Naples State FL Zip Code 34110	Purpose of Disbursement Event	
Candidate Name	Category/Type	Transaction ID : SB17.6092
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3922.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 78			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Ty Vigil		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 180 33rd Avenue NE		Amount of Each Disbursement this Period 248.59
City Naples	State FL	
Zip Code 34120	Purpose of Disbursement In-kind - Travel	Transaction ID : SB17.6114
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ty Vigil		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 180 33rd Avenue NE		Amount of Each Disbursement this Period 62.97
City Naples	State FL	
Zip Code 34120	Purpose of Disbursement In-kind - Travel	Transaction ID : SB17.6115
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ty Vigil		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 180 33rd Avenue NE		Amount of Each Disbursement this Period 33.91
City Naples	State FL	
Zip Code 34120	Purpose of Disbursement In-kind - Office Supplies	Transaction ID : SB17.6123
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	345.47
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 78			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Byron Donalds

Full Name (Last, First, Middle Initial) A. Ty Vigil		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 180 33rd Avenue NE		Amount of Each Disbursement this Period 20.00
City Naples	State FL	
Zip Code 34120	Purpose of Disbursement In-kind - Office Supplies	Transaction ID : SB17.6151
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ty Vigil		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 180 33rd Avenue NE		Amount of Each Disbursement this Period 59.36
City Naples	State FL	
Zip Code 34120	Purpose of Disbursement In-kind - Food & Beverage	Transaction ID : SB17.6163
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ty Vigil		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 180 33rd Avenue NE		Amount of Each Disbursement this Period 74.19
City Naples	State FL	
Zip Code 34120	Purpose of Disbursement In-kind - Office Supplies	Transaction ID : SB17.6164
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	153.55
TOTAL This Period (last page this line number only).....	33140.44