

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

STEVE OELRICH FOR CONGRESS

ADDRESS (number and street) ▼

5200 NW 43RD ST SUITE 102 PMB 151

Check if different than previously reported. (ACC)

Gainesville

FL

32606

2. **FEC IDENTIFICATION NUMBER** ▼

C C00509901

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

FL

06

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 08 / 14 / 2012 in the State of FL

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

07 / 01 / 2012

through

07 / 25 / 2012

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 Jacqueline Schall

Signature of Treasurer Jacqueline Schall

[Electronically Filed]

Date

10 / 15 / 2012

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

STEVE OELRICH FOR CONGRESS

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))....	6965.00	199387.10
(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)).....	6965.00	199387.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39034.01	203083.71
(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)).....	39034.01	203083.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20304.39	
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).....	37674.00	

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

STEVE OELRICH FOR CONGRESS

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).....	5250.00	170570.00
(ii) Unitemized.....	1715.00	22317.10
(iii) TOTAL of contributions from individuals ▶	6965.00	192887.10
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) The Candidate.....	0.00	500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6965.00	199387.10
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	24000.00	24000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	24000.00	24000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	1.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	30965.00	223388.10

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39034.01	203083.71
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) ►	39034.01	203083.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28373.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	30965.00
25. SUBTOTAL (add Line 23 and Line 24).....	59338.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39034.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20304.39

**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 32
	<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)
STEVE OELRICH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Eric Brill

Mailing Address 500 NW 23rd Street

City Gainesville State FL Zip Code 32607

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

Name of Employer The Orthopaedic Institute Occupation CEO

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
 07 / 19 / 2012

Transaction ID : SA11AI.5893

Amount of Each Receipt this Period
500.00

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

Mailing Address 938 Little River Campground Rd

City Pisgah Forest State NC Zip Code 28768

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

Name of Employer Self Occupation Farmer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2012

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period
500.00

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

Mailing Address 1422 SW 98th Street

City Gainesville State FL Zip Code 32607

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

Name of Employer Suburban Animal Hospital Occupation Veterinarian

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
 07 / 16 / 2012

Transaction ID : SA11AI.5910

Amount of Each Receipt this Period
500.00

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 6 OF 32
	<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)
STEVE OELRICH FOR CONGRESS

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

Mailing Address **PO Box 143**

City **Gainesville** State **FL** Zip Code **32602**

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

Name of Employer **CFT, LLC** Occupation **Owner**

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
07 / 16 / 2012

Transaction ID : SA11AI.5908

Amount of Each Receipt this Period
250.00

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

Mailing Address **6015 NW 88th Street**

City **Gainesville** State **FL** Zip Code **32653**

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

Name of Employer **Manuel F Diaz, M.D.** Occupation **Internal Medicine**

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
07 / 09 / 2012

Transaction ID : SA11AI.5835

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
James F Eckert Jr.

Mailing Address **8409 SW 3rd Place**

City **Gainesville** State **FL** Zip Code **32607**

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

Name of Employer **None** 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 Y Y
07 / 25 / 2012

Transaction ID : SA11AI.5965

Amount of Each Receipt this Period
300.00

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 7 OF 32
	<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)
STEVE OELRICH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Randi Elrad

Mailing Address 8015 SW 42 Terr

City Gainesville State FL Zip Code 32608

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

Name of Employer Crime Prevention Security Occupation Co-owner

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
 07 / 16 / 2012

Transaction ID : SA11AI.5907

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James D Henderson II

Mailing Address 3611 SW 63rd Lane

City Gainesville State FL Zip Code 32608

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

Name of Employer Self Occupation Civil Engineer

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
 07 / 16 / 2012

Transaction ID : SA11AI.5904

Amount of Each Receipt this Period
300.00

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

Mailing Address 4214 SW 182nd Dr

City Newberry State FL Zip Code 32669

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

Name of Employer None 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
 07 / 18 / 2012

Transaction ID : SA11AI.5921

Amount of Each Receipt this Period
250.00

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 8 OF 32
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Donald Matz		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 05 / 2012	
Mailing Address 4314 sW 96th Drive		Transaction ID : SA11AI.5820	
City Gainesville	State FL	Zip Code 32608	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Tower Hill Insurance Group	Occupation Insurance Executive		
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) B. John Pastore Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 16 / 2012	
Mailing Address 8015 SW 42nd Ter		Transaction ID : SA11AI.5906	
City Gainesville	State FL	Zip Code 32606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Universal Security Monitoring	Occupation President		
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) C. Linda Singleton		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012	
Mailing Address 4319 SW 86th Way		Transaction ID : SA11AI.5896	
City Gainesville	State FL	Zip Code 32608	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer None	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		

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	1200.00

**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 32
	<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)
STEVE OELRICH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Watson

Mailing Address 1910 NE 23rd Terrace

City Gainesville State FL Zip Code 32605

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

Name of Employer James Moore & Company Occupation Accountant

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
 07 / 18 / 2012

Transaction ID : SA11AI.5923

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 840071

City St Augustine State FL Zip Code 32080

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

Name of Employer None 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
 07 / 12 / 2012

Transaction ID : SA11AI.5875

Amount of Each Receipt this Period
200.00

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).....

700.00

5250.00

**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 32
	<input type="checkbox"/> 11a 12 <input checked="" 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)
STEVE OELRICH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN M OELRICH

Mailing Address 5200 NW 43RD STREET SUITE 102
PMB 151

City Gainesville State FL Zip Code 32606

FEC ID number of contributing federal political committee. **C** H2FL06117

Name of Employer Florida Senate Occupation State Senator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
24500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2012

Transaction ID : SA13A.5915

Amount of Each Receipt this Period
24000.00

Loan from Candidate to Campaign

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).....

24000.00

24000.00

**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 11 OF 32			
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Advantage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 2300 Clarendon Blvd Suite 1004		Amount of Each Disbursement this Period 276.75 Transaction ID : SB17.5927
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Telephone Calls	Category/ Type 003
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) B. Advantage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 2300 Clarendon Blvd Suite 1004		Amount of Each Disbursement this Period 730.74 Transaction ID : SB17.5952
City Arlington	State VA	
Zip Code 22201	Purpose of Disbursement Telephone Calls	Category/ Type 003
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) c. Mason Alley		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 1642 NW 11th Rd		Amount of Each Disbursement this Period 258.45 Transaction ID : SB17.5801
City Gainesville	State FL	
Zip Code 32605	Purpose of Disbursement Reimburse Campaign Expenses	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

SUBTOTAL of Disbursements This Page (optional).....	1265.94
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 12 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fed-Ex		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 3822 W Newberry Rd		Amount of Each Disbursement this Period 78.42
City Gainesville	State FL	
Zip Code 32606		Transaction ID : SB17.5801.0
Purpose of Disbursement Copies	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS		[MEMO ITEM]
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: 06	

Full Name (Last, First, Middle Initial) B. Mason Alley		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 1642 NW 11th Rd		Amount of Each Disbursement this Period 1800.00
City Gainesville	State FL	
Zip Code 32605		Transaction ID : SB17.5957
Purpose of Disbursement Campaign Field Work	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address PO Box 53601		Amount of Each Disbursement this Period 63.80
City Phoenix	State AZ	
Zip Code 85072		Transaction ID : SB17.5830
Purpose of Disbursement Merchant Acct Fee	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06	

SUBTOTAL of Disbursements This Page (optional).....	1863.80
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 13 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Caroline Anderson		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 132 SW 62nd Street, Apt 601		Amount of Each Disbursement this Period 333.33 Transaction ID : SB17.5814
City State Zip Code Gainesville FL 32607	Purpose of Disbursement Campaign Field Work 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) B. Caroline Anderson		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 132 SW 62nd Street, Apt 601		Amount of Each Disbursement this Period 124.12 Transaction ID : SB17.5842
City State Zip Code Gainesville FL 32607	Purpose of Disbursement Reimburse Campaign Expenses 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 7015 SE US 301		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.5842.2 [MEMO ITEM]
City State Zip Code Hawthorne FL 32640	Purpose of Disbursement Reimburse Fuel for Campaign Travel 002 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

SUBTOTAL of Disbursements This Page (optional).....	457.45
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 14 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Caroline Anderson		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2012
Mailing Address 132 SW 62nd Street, Apt 601		Amount of Each Disbursement this Period 650.00 Transaction ID : SB17.5916
City State Zip Code Gainesville FL 32607	Purpose of Disbursement Campaign Field Work	
Candidate Name STEVE OELRICH FOR CONGRESS		Category/Type 001
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: 06		

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 13170 Atlantic Blvd		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5815
City State Zip Code Jacksonville FL 32225	Purpose of Disbursement Bank Service Charges	
Candidate Name STEVE OELRICH FOR CONGRESS		Category/Type 001
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: 06		

Full Name (Last, First, Middle Initial) c. Michele Burczyk		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 2704 NW 1st Ave		Amount of Each Disbursement this Period 276.00 Transaction ID : SB17.5754
City State Zip Code Gainesville FL 32607	Purpose of Disbursement Campaign Field Work	
Candidate Name STEVE OELRICH FOR CONGRESS		Category/Type 001
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: 06		

SUBTOTAL of Disbursements This Page (optional).....	956.00
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 15 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michele Burczyk		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 2704 NW 1st Ave		Amount of Each Disbursement this Period 4,567,890.12 125.00 Transaction ID : SB17.5855
City Gainesville	State FL	
Purpose of Disbursement Campaign Field Work	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) B. Michele Burczyk		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2012
Mailing Address 2704 NW 1st Ave		Amount of Each Disbursement this Period 4,567,890.12 270.00 Transaction ID : SB17.5954
City Gainesville	State FL	
Purpose of Disbursement Campaign Field Work	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) c. Clay County Utility Authority		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 3176 Old Jennings Rd		Amount of Each Disbursement this Period 4,567,890.12 30.38 Transaction ID : SB17.5951
City Middleburg	State FL	
Purpose of Disbursement Utilities	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

SUBTOTAL of Disbursements This Page (optional).....	425.38
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 16 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COX		Date of Disbursement MM / DD / YYYY 07 / 13 / 2012
Mailing Address PO Box 9001007		Amount of Each Disbursement this Period 99.00 Transaction ID : SB17.5882
City Louisville	State KY	
Zip Code 40290	Purpose of Disbursement Internet Expense	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) B. Lee Crane		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 4020 Newberry Rd #400		Amount of Each Disbursement this Period 572.40 Transaction ID : SB17.5762
City Gainesville	State FL	
Zip Code 32607	Purpose of Disbursement Office Rent	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) c. Creative Direct, LLC		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 25 E Main St The Reagan Bldg		Amount of Each Disbursement this Period 2730.00 Transaction ID : SB17.5759
City Richmond	State VA	
Zip Code 23219	Purpose of Disbursement Mailers	Category/ Type 004
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

SUBTOTAL of Disbursements This Page (optional).....	3401.40
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 17 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andrew Gordon		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 1609 NW 22nd Lane		Amount of Each Disbursement this Period 328.00 Transaction ID : SB17.5765
City State Zip Code Gainesville FL 32605	Purpose of Disbursement Campaign Field Work	
Candidate Name STEVE OELRICH FOR CONGRESS		Category/Type 001
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: 06		

Full Name (Last, First, Middle Initial) B. Andrew Gordon		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 1609 NW 22nd Lane		Amount of Each Disbursement this Period 53.15 Transaction ID : SB17.5766
City State Zip Code Gainesville FL 32605	Purpose of Disbursement Reimburse Campaign Expense	
Candidate Name STEVE OELRICH FOR CONGRESS		Category/Type 002
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: 06		

Full Name (Last, First, Middle Initial) c. Andrew Gordon		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1609 NW 22nd Lane		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5878
City State Zip Code Gainesville FL 32605	Purpose of Disbursement Reimburse Campaign Travel Expense	
Candidate Name STEVE OELRICH FOR CONGRESS		Category/Type 002
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: 06		

SUBTOTAL of Disbursements This Page (optional).....	481.15
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 18 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brian Graham		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address PO Box 9630		Amount of Each Disbursement this Period 440.78 Transaction ID : SB17.5809
City Fleming Island	State FL	
Zip Code 32006	Purpose of Disbursement Reimburse Campaign Expense	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2012
Mailing Address 1580 Branan Field Rd		Amount of Each Disbursement this Period 56.08 Transaction ID : SB17.5809.1
City Middleburg	State FL	
Zip Code 32068	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	<input type="checkbox"/> Other (specify)	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Gulf Management Systems		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 2753 S.R. 580		Amount of Each Disbursement this Period 244.16 Transaction ID : SB17.5817
City Clearwater	State FL	
Zip Code 33761	Purpose of Disbursement Merchant Acct Fees	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	440.78
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 19 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Heritage Investments Ltd.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address PO Box 1000		Amount of Each Disbursement this Period 9.68 Transaction ID : SB17.5763
City Middleburg State FL Zip Code 32050	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) B. Jacqueline Schall, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address PO Box 330965		Amount of Each Disbursement this Period 9.68 Transaction ID : SB17.5932
City Atlantic Beach State FL Zip Code 32233	Purpose of Disbursement Reimburse Campaign Expense 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) C. Fed-Ex		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address 3822 W Newberry Rd		Amount of Each Disbursement this Period 9.68 Transaction ID : SB17.5932.0 [MEMO ITEM]
City Gainesville State FL Zip Code 32606	Purpose of Disbursement Reimburse Fed Ex Charges for Package 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

SUBTOTAL of Disbursements This Page (optional).....	608.88
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 20 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marlin McDaniel		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 701 SW 62nd Blvd, Apt 242		Amount of Each Disbursement this Period 394.00 Transaction ID : SB17.5881
City State Zip Code Gainesville FL 32607	Purpose of Disbursement Campaign Field Work 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) B. Marlin McDaniel		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2012
Mailing Address 701 SW 62nd Blvd, Apt 242		Amount of Each Disbursement this Period 322.00 Transaction ID : SB17.5955
City State Zip Code Gainesville FL 32607	Purpose of Disbursement Campaign Field Work 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) c. Anahita Nemat		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 2022 NW 3rd Ave		Amount of Each Disbursement this Period 10.74 Transaction ID : SB17.5796
City State Zip Code Gainesville FL 32603	Purpose of Disbursement Reimburse Campaign Expenses 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

SUBTOTAL of Disbursements This Page (optional).....	726.74
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 21 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement MM / DD / YYYY 06 / 17 / 2012
Mailing Address 4901 Gate Parkway		Amount of Each Disbursement this Period 91.18 Transaction ID : SB17.5796.0
City Jacksonville State FL Zip Code 32246	Purpose of Disbursement Water for Walkers Category/Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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)	[MEMO ITEM]
State: FL District: 06		

Full Name (Last, First, Middle Initial) B. Anahita Nemat		Date of Disbursement MM / DD / YYYY 07 / 09 / 2012
Mailing Address 2022 NW 3rd Ave		Amount of Each Disbursement this Period 91.18 Transaction ID : SB17.5849
City Gainesville State FL Zip Code 32603	Purpose of Disbursement Reimburse Campaign Expenses Category/Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement MM / DD / YYYY 07 / 09 / 2012
Mailing Address 4901 Gate Parkway		Amount of Each Disbursement this Period 84.85 Transaction ID : SB17.5849.0
City Jacksonville State FL Zip Code 32246	Purpose of Disbursement Food & Decorations for Event Category/Type 003	
Candidate Name STEVE OELRICH FOR CONGRESS	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)	[MEMO ITEM]
State: FL District: 06		

SUBTOTAL of Disbursements This Page (optional).....	91.18
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 22 OF 32		
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Anahita Nemat		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 2022 NW 3rd Ave		Amount of Each Disbursement this Period 666.67 Transaction ID : SB17.5884
City Gainesville	State FL	
Purpose of Disbursement Campaign Field Work	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) B. Anahita Nemat		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 2022 NW 3rd Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5937
City Gainesville	State FL	
Purpose of Disbursement Campaign Field Work	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) c. Anahita Nemat		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 2022 NW 3rd Ave		Amount of Each Disbursement this Period 240.37 Transaction ID : SB17.5938
City Gainesville	State FL	
Purpose of Disbursement Reimburse Campaign Expenses	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

SUBTOTAL of Disbursements This Page (optional).....	2907.04
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 23 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Catherine Norris		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 2631 Cherrywood Lane		Amount of Each Disbursement this Period 302.00 Transaction ID : SB17.5756
City Titusville State FL Zip Code 32780	Purpose of Disbursement Campaign Field Work Category/Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) B. Catherine Norris		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 2631 Cherrywood Lane		Amount of Each Disbursement this Period 343.00 Transaction ID : SB17.5854
City Titusville State FL Zip Code 32780	Purpose of Disbursement Campaign Field Work Category/Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) c. Catherine Norris		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2012
Mailing Address 2631 Cherrywood Lane		Amount of Each Disbursement this Period 704.00 Transaction ID : SB17.5953
City Titusville State FL Zip Code 32780	Purpose of Disbursement Campaign Field Work Category/Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

SUBTOTAL of Disbursements This Page (optional).....	1349.00
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 24 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Opinion Strategies, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 5726 Roanoke Trail		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5761
City Tallahassee	State FL	
Zip Code 32233	Purpose of Disbursement Partial Poll Payment	Category/ Type 005
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) B. Opinion Strategies, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 5726 Roanoke Trail		Amount of Each Disbursement this Period 460.79 Transaction ID : SB17.5931
City Tallahassee	State FL	
Zip Code 32233	Purpose of Disbursement Signs	Category/ Type 004
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) c. Paperless Post		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 151 W 25th St Fl 9		Amount of Each Disbursement this Period 65.00 Transaction ID : SB17.5862
City New York	State NY	
Zip Code 10001	Purpose of Disbursement Invitations to Event	Category/ Type 003
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

SUBTOTAL of Disbursements This Page (optional).....	3025.79
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 25 OF 32			
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paperless Post		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 151 W 25th St Fl 9		Amount of Each Disbursement this Period 195.00
City New York	State NY	Zip Code 10001
Purpose of Disbursement Invitations for Event	Category/ Type 003	
Candidate Name STEVE OELRICH FOR CONGRESS	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 06		

Transaction ID : SB17.5865

Full Name (Last, First, Middle Initial) B. Matt Pesek		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 3461 SW 2nd Ave, Apt 264		Amount of Each Disbursement this Period 300.00
City Gainesville	State FL	Zip Code 32607
Purpose of Disbursement Campaign Field Work	Category/ Type 001	
Candidate Name STEVE OELRICH FOR CONGRESS	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 06		

Transaction ID : SB17.5867

Full Name (Last, First, Middle Initial) c. Matt Pesek		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address 3461 SW 2nd Ave, Apt 264		Amount of Each Disbursement this Period 34.85
City Gainesville	State FL	Zip Code 32607
Purpose of Disbursement Reimburse Campaign Expense	Category/ Type 002	
Candidate Name STEVE OELRICH FOR CONGRESS	Disbursement For: 2012	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 06		

Transaction ID : SB17.5868

SUBTOTAL of Disbursements This Page (optional).....	529.85
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 26 OF 32			
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City Line, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 3936 W Newberry Rd		Amount of Each Disbursement this Period 17.85
City Gainesville	State FL	
Purpose of Disbursement Reimburse Fuel for Campaign Travel		Transaction ID : SB17.5868.0
Candidate Name STEVE OELRICH FOR CONGRESS		
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)	[MEMO ITEM]
State: FL	District: 06	

Full Name (Last, First, Middle Initial) B. City Line, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 3936 W Newberry Rd		Amount of Each Disbursement this Period 17.00
City Gainesville	State FL	
Purpose of Disbursement Reimburse Fuel for Campaign Travel		Transaction ID : SB17.5868.1
Candidate Name STEVE OELRICH FOR CONGRESS		
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)	[MEMO ITEM]
State: FL	District: 06	

Full Name (Last, First, Middle Initial) c. Matt Pesek		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 3461 SW 2nd Ave, Apt 264		Amount of Each Disbursement this Period 625.12
City Gainesville	State FL	
Purpose of Disbursement Campaign Field Work		Transaction ID : SB17.5956
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06	

SUBTOTAL of Disbursements This Page (optional).....	625.12
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 27 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brian Peterson		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2701 NW 23rd Blvd Apt R144		Amount of Each Disbursement this Period 360.00 Transaction ID : SB17.5783
City State Zip Code Gainesville FL 32605	Purpose of Disbursement Campaign Field Work 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) B. QGiv		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 53 Lake Morton Dr Ste 10		Amount of Each Disbursement this Period 197.92 Transaction ID : SB17.5818
City State Zip Code Lakeland FL 33801	Purpose of Disbursement Merchant Acct Fees 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) c. Kevin Reichardt		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2801 NW 23rd Blvd Apt X168		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5775
City State Zip Code Gainesville FL 32606	Purpose of Disbursement Campaign Field Work 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

SUBTOTAL of Disbursements This Page (optional).....	957.92
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 28 OF 32		
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kevin Reichardt		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2801 NW 23rd Blvd Apt X168		Amount of Each Disbursement this Period 71.29 Transaction ID : SB17.5776
City State Zip Code Gainesville FL 32606	Purpose of Disbursement Reimburse Campaign Expense 002 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) B. SRH Media		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 2204 Countryside Drive		Amount of Each Disbursement this Period 16750.00 Transaction ID : SB17.5958
City State Zip Code Silver Spring MD 20905	Purpose of Disbursement Television Advertisement 003 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

Full Name (Last, First, Middle Initial) c. SuppliesOutlet.com		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 10381 Double R Blvd		Amount of Each Disbursement this Period 242.90 Transaction ID : SB17.5794
City State Zip Code Reno NV 89521	Purpose of Disbursement Ink for Printers 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06		

SUBTOTAL of Disbursements This Page (optional).....	17064.19
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 29 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 4600 SW34th Street		Amount of Each Disbursement this Period 48.93 Transaction ID : SB17.5785
City Gainesville State FL Zip Code 32608	Purpose of Disbursement BRM Postage 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 225 College Dr		Amount of Each Disbursement this Period 270.00 Transaction ID : SB17.5788
City Orange Park State FL Zip Code 36065	Purpose of Disbursement Postage 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address 3650 Southside Blvd		Amount of Each Disbursement this Period 364.36 Transaction ID : SB17.5962
City Jacksonville State FL Zip Code 32216	Purpose of Disbursement Postage 001 Category/Type	
Candidate Name STEVE OELRICH FOR CONGRESS		
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: 06		

SUBTOTAL of Disbursements This Page (optional).....	683.29
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 30 OF 32	
	<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)
STEVE OELRICH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 395.76 Transaction ID : SB17.5935
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone Expense	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) B. Kristine Zooberg		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 4972 NW 45th Rd, Apt 108		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5928
City Gainesville	State FL	
Zip Code 32606	Purpose of Disbursement Reimburse Campaign Expense	Category/ Type 001
Candidate Name STEVE OELRICH FOR CONGRESS	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: 06	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	495.76
TOTAL This Period (last page this line number only).....	38356.66

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **STEVE OELRICH FOR CONGRESS** Transaction ID : **SC/10.5915**

LOAN SOURCE Full Name (Last, First, Middle Initial) STEPHEN M OELRICH	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5200 NW 43RD STREET SUITE 102 PMB 151		

City	State	ZIP Code
GAINESVILLE	FL	32606

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
24000.00	0.00	24000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 07	D 20	Y 2012	M M / D D / Y 11/30/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	24000.00
TOTALS This Period (last page in this line only).....	24000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

STEVE OELRICH FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Signs Unlimited

Mailing Address 618 S Magnolia Ave

City State Zip Code
Ocala FL 34471

Nature of Debt (Purpose):
Signs

Outstanding Balance Beginning This Period **Transaction ID : SD10.5973**
10600.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 10600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Signs Unlimited

Mailing Address 618 S Magnolia Ave

City State Zip Code
Ocala FL 34471

Nature of Debt (Purpose):
Signs

Outstanding Balance Beginning This Period **Transaction ID : SD10.5974**
3074.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 3074.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	▶	13674.00
2) TOTALS This Period (last page this line number only)	▶	13674.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	24000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		37674.00