

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MICA 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))....	133139.00	338548.23
(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)).....	133139.00	338548.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14303.76	154067.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1340.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	14303.76	152726.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	535309.84	
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

MICA FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 31 / 2015

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).....	68860.00	145327.69
(ii) Unitemized.....	15929.00	27000.54
(iii) TOTAL of contributions from individuals ▶	84789.00	172328.23
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	48350.00	166220.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	133139.00	338548.23
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	1340.45
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	247.66	980.73
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	133386.66	340869.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14303.76	154067.35
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	570.00	18886.60
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14873.76	172953.95

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	416796.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	133386.66
25. SUBTOTAL (add Line 23 and Line 24).....	550183.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14873.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	535309.84

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

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

FOR LINE NUMBER: PAGE 5 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Gregory Lee

Mailing Address 2516 Shrewsbury Rd

City Orlando State FL Zip Code 32803

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

Name of Employer BakerHostetler Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : 0038033

Amount of Each Receipt this Period
 250.00

On line contribution

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

Mailing Address 1675 Rachels Ridge Loop

City Ocoee State FL Zip Code 34761

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

Name of Employer Space Coast ENT Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : 0037582

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Sandra K. Bushue

Mailing Address 2902 S. 13th St, #302

City Arlington State VA Zip Code 22204

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

Name of Employer B&I Transportation Consulting Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : 0037583

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

**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 61
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. James C. France		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2015
Mailing Address P. O. Box 2875		Transaction ID : 0037597
City Daytona Beach	State FL	Zip Code 32120-2801
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer International Speedway Corp.	Occupation Executive	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) Mrs. Sharon M. France		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2015
Mailing Address 1147 N. Halifax Ave		Transaction ID : 0037598
City Daytona Beach	State FL	Zip Code 32118
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer self	Occupation Housewife	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) Mrs. Lesa Kennedy		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2015
Mailing Address 1 daytona blvd		Transaction ID : 0037599
City Daytona Beach	State FL	Zip Code 32114
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer International Speedway Corp.	Occupation Executive	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	8100.00
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 7 OF 61
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. J. Hyatt Brown		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 213 Riverside Drive		Transaction ID : 0037600	
City Ormond Beach	State FL	Zip Code 32176	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Brown & Brown Insurance Agency	Occupation Chief Executive Officer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) B. Mrs. Cici Brown		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 213 Riverside Drive		Transaction ID : 0037601	
City Ormond Beach	State FL	Zip Code 32176	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer self	Occupation Housewife		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) C. Mr. John R. Saunders		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2015	
Mailing Address 2246 John Anderson Dr		Transaction ID : 0037603	
City Ormond Beach	State FL	Zip Code 32176	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer International Speedway Corp.	Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	6400.00
TOTAL This Period (last page this line number only).....	6400.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. W. Garrett Crotty

Mailing Address 5 Tomoka View Drive

City Ormond Beach	State FL	Zip Code 32174
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FEC ID number of contributing federal political committee. **C**

Name of Employer ISC	Occupation Executive
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037604

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Kevin F. Bowler

Mailing Address 22 Tidewater Dr.

City Ormond Beach	State FL	Zip Code 32174
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FEC ID number of contributing federal political committee. **C**

Name of Employer Daytona Beverages	Occupation Executive
---------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037605

Amount of Each Receipt this Period

1000.00

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

Mailing Address Severn Farm
3878 Blufton Mill Road

City Free Union	State VA	Zip Code 22940
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FEC ID number of contributing federal political committee. **C**

Name of Employer John Dudinsky & Assoc.	Occupation Consultant
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037606

Amount of Each Receipt this Period

1000.00

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

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

3000.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Russell L. Roberts

Mailing Address 2200 Alaqua Drive

City Longwood State FL Zip Code 32779-3100

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

Name of Employer Florida East Coast Industries Occupation Vice president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037607

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell L. Roberts

Mailing Address 2200 Alaqua Drive

City Longwood State FL Zip Code 32779-3100

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

Name of Employer Florida East Coast Industries Occupation Vice president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037608

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Scott Walls

Mailing Address 3121 Cecelia Dr

City Apopka State FL Zip Code 32703

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

Name of Employer Akca Incorporated Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : 0037593

Amount of Each Receipt this Period
250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 10 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

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

Mailing Address 5397 Lake Bluff Ter

City Sanford State FL Zip Code 32771

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

Name of Employer Danton Hydroblasting LLC Occupation Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : 0037595

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Thomas M Brady

Mailing Address 9901 N Oak Knoll Cir

City Davie State FL Zip Code 33324

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

Name of Employer Dept of Defense Education Activit Occupation Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : 0037596

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Patrick T. Christiansen

Mailing Address 500 Ivanhoe Plaza

City Orlando State FL Zip Code 32804

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

Name of Employer Akerman, Senterfitt, etal Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : 0038037

Amount of Each Receipt this Period
 1000.00
 On line contribution

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 11 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Leila Jammal Nodarse

Mailing Address 510 Genius Dr.

City Winter Park State FL Zip Code 32789

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

Name of Employer LJ Nodarse & Associates, Inc. Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : 0037623

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Kozak

Mailing Address 3874 Haws Lane

City Orlando State FL Zip Code 32814

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : 0037625

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard J. Walsh

Mailing Address 2305 Edgewater Dr, Apt 1615

City Orlando State FL Zip Code 32804

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

Name of Employer Knob Hill Group Inc. Occupation Chief Executive Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : 0037628

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 12 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Genean McKinnon

Mailing Address 701 Via Bella

City Winter Park	State FL	Zip Code 32789
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FEC ID number of contributing federal political committee. **C**

Name of Employer GrayRobinson	Occupation Consultant
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		17		2015

Transaction ID : 0037629

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Andrew M Cummings

Mailing Address 12568 Linjohn Rd

City Jacksonville	State FL	Zip Code 32223
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FEC ID number of contributing federal political committee. **C**

Name of Employer Connelly & Wicker Inc	Occupation Executive
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		17		2015

Transaction ID : 0037630

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Athy

Mailing Address 1310 19th St, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C**

Name of Employer O'Neill Athy & Casey	Occupation Consultant
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Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		25		2015

Transaction ID : 0037613

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 13 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth Presley

Mailing Address 113 S West St, Ste 4

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
United Motorcoach Asso Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037614

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Nellie H. Kargar

Mailing Address 762 Cobblestone Way

City State Zip Code
Ormond Beach FL 32174

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

Name of Employer Occupation
ICI Homes Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037617

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Mrs. Nellie H. Kargar

Mailing Address 762 Cobblestone Way

City State Zip Code
Ormond Beach FL 32174

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

Name of Employer Occupation
ICI Homes Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037618

Amount of Each Receipt this Period
2600.00

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

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

5700.00

**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 14 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Forough Hosseini

Mailing Address 1116 Oxbridge Lane

City Ormond Beach State FL Zip Code 32174

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

Name of Employer ICI Homes Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037619

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Mrs. Forough Hosseini

Mailing Address 1116 Oxbridge Lane

City Ormond Beach State FL Zip Code 32174

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

Name of Employer ICI Homes Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037620

Amount of Each Receipt this Period
 5200.00

C. Full Name (Last, First, Middle Initial)
Mr. Morteza H. Hosseini

Mailing Address 1116 Oxbridge Lane

City Ormond Beach State FL Zip Code 32174

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

Name of Employer Intervest Construction Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037621

Amount of Each Receipt this Period
 2600.00

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

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

7800.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Morteza H. Hosseini

Mailing Address 1116 Oxbridge Lane

City Ormond Beach State FL Zip Code 32174

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

Name of Employer Intervest Construction Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037622

Amount of Each Receipt this Period
2600.00

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

Mailing Address Severn Farm
3878 Blufton Mill Road

City Free Union State VA Zip Code 22940

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

Name of Employer John Dudinsky & Assoc. Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : 0037676

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Scott Zimmerman

Mailing Address 46 Minnehaha Cir

City Maitland State FL Zip Code 32751

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

Name of Employer AGPM Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2015

Transaction ID : 0038039

Amount of Each Receipt this Period
500.00
On line contribution

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

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

3350.00

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

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

FOR LINE NUMBER: PAGE 16 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rabbi Maurice S. Kaprow

Mailing Address P.O. Box 195233

City State Zip Code
Winter Springs FL 32719

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2015

Transaction ID : 0038041

Amount of Each Receipt this Period
 250.00

On line contribution

B. Full Name (Last, First, Middle Initial)
Mr. John William Beck

Mailing Address PO Box 626

City State Zip Code
Winter Park FL 32790

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

Name of Employer Occupation
Beck Family Foundation Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : 0037667

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald E. Kirkendall

Mailing Address 1679 Shadowmoss Circle

City State Zip Code
Lake Mary FL 32746

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

Name of Employer Occupation
Retired Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : 0037668

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: PAGE 17 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Bruce W. Fennie

Mailing Address 3757 Ascot Bend Ct

City State Zip Code
Bonita Springs FL 34134

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

Name of Employer Occupation
Bruce Fennie & Associates Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : 0037669

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. George G. Daniels

Mailing Address P. O. Box 590007

City State Zip Code
Orlando FL 32859

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

Name of Employer Occupation
Daniels Manufacturing Corp. Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : 0037670

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Mr. Patrick G. Buckley

Mailing Address 1 Northview Place

City State Zip Code
White Plains NY 10603

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037720

Amount of Each Receipt this Period
25.00

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

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

3725.00

**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 61
	<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)
MICA FOR CONGRESS

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

Mailing Address 3637 Percival Rd

City Orlando State FL Zip Code 32826

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037745

Amount of Each Receipt this Period
 35.00

35.00

B. Full Name (Last, First, Middle Initial)
Mr. Dale N. Varner

Mailing Address 155 Fairway Drive

City Sanford State FL Zip Code 32771

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037761

Amount of Each Receipt this Period
 50.00

50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Patricia L. Hackert

Mailing Address 3011 Butler Ridge Road

City Deltona State FL Zip Code 32738

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037784

Amount of Each Receipt this Period
 100.00

100.00

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

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

185.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. J. Michael Hartman

Mailing Address 105 Sanora Blvd

City Sanford State FL Zip Code 32773

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

Name of Employer Self Occupation Certified Public Acct.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037789

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Dick Furman

Mailing Address 1702 Wind Drift Rd

City Belle Isle State FL Zip Code 32809

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

Name of Employer self Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037792

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mrs. Beverly A. Austin

Mailing Address 4617 W San Miguel St

City Tampa State FL Zip Code 33629

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

Name of Employer Self Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037794

Amount of Each Receipt this Period
250.00

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: PAGE 20 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Edmund C Timberlake Jr.

Mailing Address 1050 Via Merano Ct

City Winter Park State FL Zip Code 32789

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

Name of Employer Bank of America Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037795

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. W.N. Leary

Mailing Address 1100 Palmer Ave

City Winter Park State FL Zip Code 32789

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

Name of Employer Self Occupation Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037796

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Gary S. Pearl

Mailing Address 499 Timber Ridge Dr

City Longwood State FL Zip Code 32779

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

Name of Employer Pathology Specialists, PA Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037797

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 21 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Herbert V. Hinely

Mailing Address 225 Arnold Avenue

City Longwood State FL Zip Code 32750

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

Name of Employer Carbonic Industries Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037798

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Peter C. Barr

Mailing Address 514 Palmer Street

City Orlando State FL Zip Code 32801

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

Name of Employer Fry-Hammond-Barr Occupation Advertising/Public Rel.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037799

Amount of Each Receipt this Period
 700.00

C. Full Name (Last, First, Middle Initial)
Ms. Timara Bobo

Mailing Address 1 Halidon Ct

City West Palm Beach State FL Zip Code 33418

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

Name of Employer None Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037800

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 22 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Arlene K Yochum

Mailing Address 1131 Via Lugano

City Winter Park State FL Zip Code 32789

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

Name of Employer None Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037801

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ruth K. Holt

Mailing Address 6982 Sylvan Wood Drive

City Sanford State FL Zip Code 32771

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

Name of Employer Solar-Tite, Inc Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037802

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Edmund S. Greenwell

Mailing Address 450 Longwood Hills Rd.

City Longwood State FL Zip Code 32750

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037803

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 23 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Fred W Streetman Jr

Mailing Address 125 Lake Rena Dr

City Longwood State FL Zip Code 32779

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037804

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Alan E. Rozon Sr.

Mailing Address PO Box 1525

City Sanford State FL Zip Code 32772

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037841

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth W. Moore Jr.

Mailing Address 128 Variety Tree Cir

City Altamonte Springs State FL Zip Code 32714

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

Name of Employer Ken Morre Associates, Inc Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037843

Amount of Each Receipt this Period
250.00

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: PAGE 24 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Charles W. Abbott

Mailing Address 2035 Summerland Avenue

City Winter Park State FL Zip Code 32789

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

Name of Employer Holland & Knight Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037844

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Dr. Harold Greenberg

Mailing Address 280 Springside Drive

City Longwood State FL Zip Code 32779

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

Name of Employer Self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037845

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Leila Jammal Nodarse

Mailing Address 510 Genius Dr.

City Winter Park State FL Zip Code 32789

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

Name of Employer LJ Nodarse & Associates, Inc. Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037846

Amount of Each Receipt this Period
 750.00

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: PAGE 25 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Richard O. Baldwin

Mailing Address 1550 Dale Ave

City Winter Park State FL Zip Code 32789

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

Name of Employer Steward Enterprises, Inc. Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037847

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank Hamner

Mailing Address 405 Balmoral Road

City Winter Park State FL Zip Code 32789

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037848

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 3608 Casey Key Rd

City Nokomis State FL Zip Code 34275

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

Name of Employer Woodward & Associates Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037849

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

**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 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Wayne R Nelson

Mailing Address **PO BOX 917730**

City **Longwood** State **FL** Zip Code **32791**

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

Name of Employer **Nelson Residential Communities, Inc.** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
12 / 18 / 2015

Transaction ID : 0037850

Amount of Each Receipt this Period
1000.00

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

Mailing Address **Severn Farm**
3878 Blufton Mill Road

City **Free Union** State **VA** Zip Code **22940**

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

Name of Employer **John Dudinsky & Assoc.** Occupation **Consultant**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1650.00

Date of Receipt
12 / 23 / 2015

Transaction ID : 0037901

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard T. Fryer

Mailing Address **PO Box 2813**

City **Winter Park** State **FL** Zip Code **32790**

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

Name of Employer **Institute of Florida** Occupation **Realtor**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
12 / 23 / 2015

Transaction ID : 0037903

Amount of Each Receipt this Period
250.00

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

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

1450.00

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

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

FOR LINE NUMBER: PAGE 27 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Nancy Miles

Mailing Address 33 Forest View Way

City Ormond Beach State FL Zip Code 32174

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

Name of Employer self Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037904

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Steve Miles

Mailing Address 33 Forest View Way

City Ormond Beach State FL Zip Code 32174

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

Name of Employer self Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037905

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred E. Piering

Mailing Address 2585 Tuscaloosa Trl

City Maitland State FL Zip Code 32751

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

Name of Employer Weacomm Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037906

Amount of Each Receipt this Period
 250.00

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

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

750.00

**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 28 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Camille Piering

Mailing Address 2585 Tuscaloosa Trl

City Maitland State FL Zip Code 32751

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

Name of Employer None Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037907

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Teresa L. Taylor

Mailing Address 30 Cypress Lane

City Winter Park State FL Zip Code 32789-1203

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

Name of Employer Self Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037908

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. James D. Taylor

Mailing Address 30 Cypress Lane

City Winter Park State FL Zip Code 32789-1203

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

Name of Employer Jim Taylor Corp. Occupation Businessperson

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037909

Amount of Each Receipt this Period
250.00

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

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

750.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Charles W. Puckett

Mailing Address 1345 Place Picardy

City Winter Park State FL Zip Code 32789

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

Name of Employer Occupation
McDimit Davis Puckett & Co Certified Public Acct.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037910

Amount of Each Receipt this Period
250.00

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

Mailing Address 3480 Rockcliff Place

City Longwood State FL Zip Code 32779

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

Name of Employer Occupation
Control Technologies Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037911

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. J. Steven Schrimsher

Mailing Address 3340 Carla Street

City Orlando State FL Zip Code 32806

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

Name of Employer Occupation
Schrimsher Management Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037912

Amount of Each Receipt this Period
500.00

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: PAGE 30 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Charles E. Lane Jr

Mailing Address 246 N. Mounts Bay Court

City Longwood State FL Zip Code 32779

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

Name of Employer Self Occupation Businessperson

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037913

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Carlos Tseng

Mailing Address 200 Sweetwater Creek Dr E

City Longwood State FL Zip Code 32779

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

Name of Employer Self Occupation Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037914

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Wallace D. Burnett

Mailing Address Denny Miller Associates
400 N. Capitol St, NW, Ste 363

City Washington State DC Zip Code 20001

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

Name of Employer Denny Miller Associates Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037915

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 31 OF 61
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. Sal Leccese		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2015
Mailing Address 9021 Lake Hope Dr		Transaction ID : 0037916
City Maitland	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer LeCesse Development Corp	Occupation Developer	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Mr. William A. Pinto		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2015
Mailing Address 3808 Berry Bridge Way		Transaction ID : 0037922
City Marietta	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hardin Construction Co, LLC	Occupation Developer	
Receipt For: 2016 <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) Mr. Dan McDaniel		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 29 / 2015
Mailing Address 7243 Wintercreek Ln		Transaction ID : 0038054
City Tallahassee	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer State of Florida	Occupation Manager	On line contribution
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
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: PAGE 32 OF 61
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Richard O. Baldwin

Mailing Address 1550 Dale Ave

City Winter Park State FL Zip Code 32789

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

Name of Employer Steward Enterprises, Inc. Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : 0037929

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert J. Clark

Mailing Address 2927 West Bayshore Ct.

City Tampa State FL Zip Code 33611

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

Name of Employer Tampa Steel Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0037969

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Warren E Williams

Mailing Address 312 Wing Lane

City Winter Park State FL Zip Code 32789

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0037970

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 33 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Bonnie L. Hinely

Mailing Address 1473 Montcalm Street

City Orlando State FL Zip Code 32806

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

Name of Employer self Occupation Housewife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0037972

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Brian Albertson

Mailing Address 235 E. Kings Way

City Winter Park State FL Zip Code 32789

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

Name of Employer SLA Management Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0037976

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Tom Freeman

Mailing Address 414 River Dr

City De Bary State FL Zip Code 32713

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

Name of Employer Tommy Freeman, Inc. Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0037977

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 34 OF 61
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. John J. Brennan III

Mailing Address 5103 Cass St

City Omaha State NE Zip Code 68132

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

Name of Employer Self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0038058

Amount of Each Receipt this Period
 1000.00

On line contribution

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).....

1000.00

68860.00

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

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

FOR LINE NUMBER: PAGE 35 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Baker & Hostetler PAC

Mailing Address 1050 Connecticut Ave, NW 11th FL

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00174227

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : 0037584

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Aircraft Owners & Pilots Association PAC

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2015

Transaction ID : 0037585

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
American Asso. of Airport Executives Good Govt

Mailing Address 601 Madison St, Ste 400

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037602

Amount of Each Receipt this Period
 2000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 36 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Monument Strategies PAC

Mailing Address 1025 Connecticut Ave NW
Suite 1000

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037609

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Pinnacle West PAC

Mailing Address 801 Pennsylvania Ave, NW, Ste 214

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037610

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Greyhound Lines PAC

Mailing Address PO Box 660362

City Dallas State TX Zip Code 75266

FEC ID number of contributing federal political committee. **C** C00215129

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037611

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

**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 37 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Florida East Coast Industries INC> Good Government Committee

Mailing Address 2855 LE JEUNE ROAD, 4TH FLOOR

City	State	Zip Code
CORAL GABLES	FL	33134

FEC ID number of contributing federal political committee. **C** C00544908

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : 0037612

Amount of Each Receipt this Period
 _____ 2500.00

B. Full Name (Last, First, Middle Initial)
American Council of Engineering Companies PAC

Mailing Address 1015 15th St, NW, 8th FL

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer	Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : 0037626

Amount of Each Receipt this Period
 _____ 2500.00

C. Full Name (Last, First, Middle Initial)
Shutts & Bowen, LLP

Mailing Address 200 South Biscayne Blvd
Suite 4100

City	State	Zip Code
Miami	FL	33131

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

Name of Employer	Occupation
	Partnership

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : 0037627

Amount of Each Receipt this Period
 _____ 2600.00

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

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

_____ 7600.00

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

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

FOR LINE NUMBER: PAGE 38 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J.M. Family Enterprises PAC

Mailing Address 111 Jim Moran Blvd

City State Zip Code
Deerfield Beach FL 33442

FEC ID number of contributing federal political committee. **C C00240911**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037615

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Federal Express PAC

Mailing Address 942 S Shady Grove Road, 1st Floor

City State Zip Code
Memphis TN 38120

FEC ID number of contributing federal political committee. **C C00068692**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2015

Transaction ID : 0037616

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
Boeing Political Action Committee

Mailing Address 929 Long Bridge Drive

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : 0037672

Amount of Each Receipt this Period
 2000.00

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

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

8500.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
National Business Aviation Association

Mailing Address 1200 G St NW Ste 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00319723

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : 0037673

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Cubic Corp. Employees PAC

Mailing Address 9333 Balboa Ave

City San Diego State CA Zip Code 92123

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : 0037674

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees PAC

Mailing Address 2121 Crystal Dr, Ste 100

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : 0037675

Amount of Each Receipt this Period
 1000.00

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

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

3500.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Raytheon PAC

Mailing Address 1100 Wilson Blvd, Ste 1500

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : 0037671

Amount of Each Receipt this Period
4000.00

B. Full Name (Last, First, Middle Initial)
General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave., NW Suite 900

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : 0037805

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BP North America Employee PAC

Mailing Address 1101 New York Ave, NW, Ste 700

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037851

Amount of Each Receipt this Period
1000.00

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

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

6000.00

**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 41 OF 61
	<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)
MICA FOR CONGRESS

A. National Beer Wholesalers Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 King St, Ste 600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : 0037852

Amount of Each Receipt this Period
1500.00

B. Voter Education

Full Name (Last, First, Middle Initial)
Mailing Address 1201 N. Orange St, Ste 700

City Wilmington State DE Zip Code 19801

FEC ID number of contributing federal political committee. **C C00574681**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037853

Amount of Each Receipt this Period
250.00

C. Securitas USA PAC

Full Name (Last, First, Middle Initial)
Mailing Address 4330 Park Terrace Drive

City Westlake Village State CA Zip Code 91361

FEC ID number of contributing federal political committee. **C C00380931**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037917

Amount of Each Receipt this Period
1000.00

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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2015

Transaction ID : 0037918

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1212 New York Ave NW Ste 1212

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00484584

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2015

Transaction ID : 0037919

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VerizonWireless Good Government Club

Mailing Address 1300 I St. NW, 4th FL

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00025163

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2015

Transaction ID : 0037920

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Expedia, Inc Employees' Good Govt Fund

Mailing Address 1275 Pennsylvania Ave NW, 9th Fl

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : 0037921

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Florida Health PAC

Mailing Address P. O. Box 6936

City Jacksonville State FL Zip Code 32236-6936

FEC ID number of contributing federal political committee. **C C00161141**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : 0037923

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1 Massachusetts Ave. NW
Suite 350

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : 0037924

Amount of Each Receipt this Period
 2500.00

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

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

4500.00

**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 44 OF 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gridiron PAC - National Football League

Mailing Address 345 Park Ave

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : 0037925

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Alliance of Automobile Manufacturers

Mailing Address 1401 Eye St, NW Ste 900

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00516526

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : 0037926

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC

Mailing Address 550 South Tryon St

City State Zip Code
Charlotte NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : 0037973

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

**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 61
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC

Mailing Address 550 South Tryon St

City State Zip Code
Charlotte NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : 0037974

Amount of Each Receipt this Period
1000.00

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

Mailing Address 300 New Jersey Ave., NW
STE 900

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00507053

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : 0037975

Amount of Each Receipt this Period
1000.00

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 M / D 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

48350.00

**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)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Seaside National Bank & Trust

Mailing Address 700 West Morse Boulevard

City Winter Park State FL Zip Code 32789

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.62**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : 0038006

Amount of Each Receipt this Period
80.73

Interest Income

B. Full Name (Last, First, Middle Initial)
Seaside National Bank & Trust

Mailing Address 700 West Morse Boulevard

City Winter Park State FL Zip Code 32789

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **884.07**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : 0038008

Amount of Each Receipt this Period
83.45

Interest Income

C. Full Name (Last, First, Middle Initial)
Seaside National Bank & Trust

Mailing Address 700 West Morse Boulevard

City Winter Park State FL Zip Code 32789

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **967.55**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : 0038007

Amount of Each Receipt this Period
83.48

Interest Income

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

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

247.66

247.66

**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 47 OF 61	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO Box 360001			Amount of Each Disbursement this Period 461.03
City Ft Lauderdale	State FL	Zip Code 33336	Transaction ID : 0037578
Purpose of Disbursement TRAVEL & MEAL EXPENSES		002 Category/Type	
Candidate Name			ITEMIZATION BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 400 E Sky Harbor Boulevard			Amount of Each Disbursement this Period 121.10
City Phoenix	State AZ	Zip Code 85034	Transaction ID : 0037578-0001
Purpose of Disbursement Air Transportation		002 Category/Type	
Candidate Name			[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 400 E Sky Harbor Boulevard			Amount of Each Disbursement this Period 94.60
City Phoenix	State AZ	Zip Code 85034	Transaction ID : 0037578-0002
Purpose of Disbursement Air Transportation		002 Category/Type	
Candidate Name			[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	461.03
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 48 OF 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lowe's		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address 6735 SR 17-92		Amount of Each Disbursement this Period 36.51
City Fern Park	State FL	
Zip Code 32730	Purpose of Disbursement Office Supplies	Transaction ID : 0037589
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 143.92
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement PHONE EXPENSES	Transaction ID : 0038025
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Millennium Consulting Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2015
Mailing Address PO Box 568926		Amount of Each Disbursement this Period 1035.25
City Orlando	State FL	
Zip Code 32856	Purpose of Disbursement MAILING SERVICES	Transaction ID : 0037587
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1215.68
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 49 OF 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Heathrow Country Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 1200 Bridgewater Dr			Amount of Each Disbursement this Period 750.61 Transaction ID : 0037592
City Heathrow	State FL	Zip Code 32746	
Purpose of Disbursement Catering Services		Category/ Type 007	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Piryx, Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 144 2nd St, 1st Floor			Amount of Each Disbursement this Period 11.25 Transaction ID : 0038034
City San Francisco	State CA	Zip Code 94105	
Purpose of Disbursement Credit card processing fees		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. CenturyLink			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address P. O. Box 30784			Amount of Each Disbursement this Period 200.95 Transaction ID : 0038026
City Tampa	State FL	Zip Code 33630	
Purpose of Disbursement PHONE EXPENSES		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	962.81
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 50 OF 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wiley Deck			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015	
Mailing Address 127 Candlestick Drive			Amount of Each Disbursement this Period 347.79	
City Stafford	State VA	Zip Code 22554	Transaction ID : 0038020	
Purpose of Disbursement TRAVEL & MEAL EXPENSES		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Piryx, Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015	
Mailing Address 144 2nd St, 1st Floor			Amount of Each Disbursement this Period 4.50	
City San Francisco	State CA	Zip Code 94105	Transaction ID : 0038036	
Purpose of Disbursement Credit card processing fees		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Petty Cash			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015	
Mailing Address P. O. Box 181546			Amount of Each Disbursement this Period 100.00	
City Casselberry	State FL	Zip Code 32718	Transaction ID : 0037685	
Purpose of Disbursement Petty Cash		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	452.29
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 51 OF 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 2716.30 Transaction ID : 0038062
City Ft Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement TRAVEL & MEAL EXPENSES	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : 0038038
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit card processing fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 355 E State Road 436		Amount of Each Disbursement this Period 160.28 Transaction ID : 0037679
City Casselberry	State FL	
Zip Code 32707	Purpose of Disbursement Food and Refreshments for Event	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2921.58
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 61	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Publix Super Market		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 1455 E State Road 436		Amount of Each Disbursement this Period 333.92 Transaction ID : 0037680
City Casselberry	State FL	
Zip Code 32707	Purpose of Disbursement Food and Refreshments for Event	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 300 1st Street, SE		Amount of Each Disbursement this Period 318.54 Transaction ID : 0038010
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Catering Services	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. 814 Consulting LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015
Mailing Address 5827 Colfax Ave		Amount of Each Disbursement this Period 284.00 Transaction ID : 0038031
City Alexandria	State VA	
Zip Code 22331	Purpose of Disbursement Meal Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	936.46
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 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 4684.01 Transaction ID : 0038027
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement PHONE EXPENSES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CenturyLink		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address P. O. Box 30784		Amount of Each Disbursement this Period 201.74 Transaction ID : 0038029
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement PHONE EXPENSES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 4684.01 Transaction ID : 0038063
City Ft Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement TRAVEL & MEAL EXPENSES	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5029.58
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 61		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50 Transaction ID : 0038040
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card processing fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 11.25 Transaction ID : 0038042
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card processing fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 Transaction ID : 0038044
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card processing fees 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	34.88
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 55 OF 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015	
Mailing Address 144 2nd St, 1st Floor			Amount of Each Disbursement this Period 1.58	
City San Francisco	State CA	Zip Code 94105	Transaction ID : 0038046	
Purpose of Disbursement Credit card processing fees		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. FILPAC			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015	
Mailing Address 3624 Lieb Street			Amount of Each Disbursement this Period 1000.00	
City Columbus	State OH	Zip Code 43214	Transaction ID : 0038015	
Purpose of Disbursement COMPUTER EXPENSES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Piryx, Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015	
Mailing Address 144 2nd St, 1st Floor			Amount of Each Disbursement this Period 2.25	
City San Francisco	State CA	Zip Code 94105	Transaction ID : 0038049	
Purpose of Disbursement Credit card processing fees		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1003.83
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 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Petty Cash		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		11		2015
M M	/	D D	/	Y Y Y Y								
12		11		2015								
Mailing Address P. O. Box 181546		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Casselberry</td> <td>FL</td> <td>32718</td> </tr> </table>		City	State	Zip Code	Casselberry	FL	32718	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00			
City	State	Zip Code										
Casselberry	FL	32718										
100.00												
Purpose of Disbursement Petty Cash		Transaction ID : 0038016										
Candidate Name		Category/Type 001										
Office Sought:	Disbursement For: 2016											
<input 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: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Piryx, Inc		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>15</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		15		2015
M M	/	D D	/	Y Y Y Y								
12		15		2015								
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94105</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94105	<table border="1"> <tr> <td>4.46</td> </tr> </table>	4.46			
City	State	Zip Code										
San Francisco	CA	94105										
4.46												
Purpose of Disbursement Credit card processing fees		Transaction ID : 0038051										
Candidate Name		Category/Type 003										
Office Sought:	Disbursement For: 2016											
<input 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: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
c. Petty Cash		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		17		2015
M M	/	D D	/	Y Y Y Y								
12		17		2015								
Mailing Address P. O. Box 181546		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Casselberry</td> <td>FL</td> <td>32718</td> </tr> </table>		City	State	Zip Code	Casselberry	FL	32718	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00			
City	State	Zip Code										
Casselberry	FL	32718										
100.00												
Purpose of Disbursement Petty Cash		Transaction ID : 0038011										
Candidate Name		Category/Type 001										
Office Sought:	Disbursement For: 2016											
<input 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: District:												

SUBTOTAL of Disbursements This Page (optional).....	204.46
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 61		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 2.25 Transaction ID : 0038053
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fees	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2015
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 143.83 Transaction ID : 0038028
City Dallas	State TX Zip Code 75266	
Purpose of Disbursement PHONE EXPENSES	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : 0038055
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fees	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	191.08
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 61		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CenturyLink		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address P. O. Box 30784		Amount of Each Disbursement this Period 201.74 Transaction ID : 0038030
City Tampa	State FL Zip Code 33630	
Purpose of Disbursement PHONE EXPENSES	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 1.13 Transaction ID : 0038057
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fees	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : 0038059
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Credit card processing fees	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	247.87
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 61			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015		
Mailing Address 144 2nd St, 1st Floor			Amount of Each Disbursement this Period 2.25		
City San Francisco	State CA	Zip Code 94105	Transaction ID : 0038061		
Purpose of Disbursement Credit card processing fees		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

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

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).....	2.25
TOTAL This Period (last page this line number only).....	13663.80

**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 61
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oviedo Rotary Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address PO Box 622054		Amount of Each Disbursement this Period 240.00 Transaction ID : 0037575
City Oviedo	State FL	
Zip Code 32765	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Helpful Hands of Seminole County		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address PO BOX 620062		Amount of Each Disbursement this Period 200.00 Transaction ID : 0037576
City Oviedo	State FL	
Zip Code 32762	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Seminole Cultural Arts Council		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2015
Mailing Address Po Box 28		Amount of Each Disbursement this Period 35.00 Transaction ID : 0037590
City Sanford	State FL	
Zip Code 32772	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	475.00
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 61 OF 61
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Republican Women's Club of Seminole		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 3123		Amount of Each Disbursement this Period 95.00 Transaction ID : 0037682
City Longwood	State FL	
Zip Code 32779	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DeLand Area Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address P. O. Box 629		Amount of Each Disbursement this Period 20.00 Transaction ID : 0037683
City DeLand	State FL	
Zip Code 32721-0629	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Wayne Densch Performing Arts Center		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 201-203 S. Magnolia		Amount of Each Disbursement this Period 50.00 Transaction ID : 0037686
City Sanford	State FL	
Zip Code 32771	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	570.00