

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines

Friends of Connie Mack

ADDRESS (number and street) P.O. Box 519

Check if different than previously reported. (ACC) Naples FL 34106

2. FEC IDENTIFICATION NUMBER C00391243 CITY STATE ZIP CODE STATE DISTRICT 3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- X April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on in the State of

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

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

Election on in the State of

5. Covering Period 01 01 2011 through 03 31 2011

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

Type or Print Name of Treasurer Craig Engle

Signature of Treasurer Electronically Filed by Craig Engle Date 04 15 2011

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

Table with 8 columns for Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 106

Write or Type Committee Name

Friends of Connie Mack

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 1 1

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 1 1

	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)).....	222291.16	242489.16
(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)).....	222291.16	242489.16
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	170989.08	250066.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	1750.00	2350.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	169239.08	247716.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	460855.10	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Friends of Connie Mack

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	153570.36	167970.36
(i) Itemized (use Schedule A).....	19220.80	20018.80
(ii) Unitemized.....	172791.16	187989.16
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	49500.00	54500.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	222291.16	242489.16
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	1750.00	2350.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	224041.16	244839.16

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	170989.08	250066.89
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.....	1200.00	14595.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	172189.08	264661.89

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	409003.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	224041.16
25. SUBTOTAL (add Line 23 and Line 24).....	633044.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	172189.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	460855.10

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Daniel Adams

Mailing Address 2104 West First Street #2304

City State Zip Code  
Fort Myers FL 33901

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

Name of Employer Self Employed Occupation investor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

**Transaction ID:** 10406.C23582

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Kathy Adams

Mailing Address 2104 W 1st St #2304

City State Zip Code  
Fort Myers FL 33901

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

Name of Employer retired Occupation retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

**Transaction ID:** 10406.C23583

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Darryl Allen

Mailing Address PO Box 1206

City State Zip Code  
Boca Grande FL 33921-1206

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

Name of Employer retired Occupation retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	1	/	2	0	1	1

**Transaction ID:** 10215.C22992

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**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 6 / 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) John N. Allen		Date of Receipt
	Mailing Address 100 Kingstown Drive		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Naples	FL	34102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self-employed		Occupation	Receipt
self-employed		real estate developer	
Receipt For: 2012	Election Cycle-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2300.00"/>		
Transaction ID: 10413.C23587		Amount of Each Receipt this Period	
		<input type="text" value="2300.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) John N. Allen		Date of Receipt
	Mailing Address 100 Kingstown Drive		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Naples	FL	34102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self-employed		Occupation	Receipt
self-employed		real estate developer	
Receipt For: 2012	Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="4800.00"/>		
Transaction ID: 10406.C23474		Amount of Each Receipt this Period	
		<input type="text" value="2500.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lawrence R. Antonucci		Date of Receipt
	Mailing Address 2014 Four Mile Cove Pkwy		<input type="text" value="02"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Cape Coral	FL	33990
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Lee Memorial Health System		Occupation	Receipt
Lee Memorial Health System		COO	
Receipt For: 2012	Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>		
Transaction ID: 10310.C23098		Amount of Each Receipt this Period	
		<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5800.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) C. Michael Armstrong		Date of Receipt MM / DD / YYYY 01 / 23 / 2011
	Mailing Address 1683 Galleon Dr		Transaction ID: 10131.C22969
	City Naples	State FL	Zip Code 34102-7717
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
	Name of Employer retired		Occupation retired
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2400.00	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Jorge Arrizurieta		Date of Receipt MM / DD / YYYY 03 / 28 / 2011
	Mailing Address 1118 Placetas Avenue		Transaction ID: 10406.C23473
	City Miami	State FL	Zip Code 33146
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Arrizurieta & Associates		Occupation president
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Jonathan Awner		Date of Receipt MM / DD / YYYY 03 / 28 / 2011
	Mailing Address 5545 Arbor Ln		Transaction ID: 10406.C23472
	City Coral Gables	State FL	Zip Code 33156-3434
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Akerman Senterfitt		Occupation attorney
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4400.00
<b>TOTAL</b> 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 8 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Colbert Baker

Mailing Address 100 N Collier Blvd.

City State Zip Code  
Marco Island FL 34145

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 26 / 2011

**Transaction ID:** 10406.C23274

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jay Baker

Mailing Address 4101 Gulf Shore Blvd N PH 5

City State Zip Code  
Naples FL 34103-2912

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

Name of Employer retired Occupation retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

**Transaction ID:** 10406.C23488

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 4101 Gulf Shore Blvd N PH 5

City State Zip Code  
Naples FL 34103-2912

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

Name of Employer retired Occupation retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

**Transaction ID:** 10406.C23491

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5250.00**

**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 9 / 106  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Doyle Bartlett

Mailing Address 609 Oakley Pl

City State Zip Code  
Alexandria VA 22302-3611

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

Name of Employer Bartlett & Bendall, LLC Occupation lobbyist

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 29 / 2011

**Transaction ID:** 10413.C23599

Amount of Each Receipt this Period  
1005.00

In-Kind  
Inkind: event catering

**B.** Full Name (Last, First, Middle Initial)  
George G. Beasley

Mailing Address 10 16th Ave S

City State Zip Code  
Naples FL 34102-7442

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

Name of Employer Beasley Broadcast Group, Inc. Occupation ceo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 18 / 2011

**Transaction ID:** 10215.C23041

Amount of Each Receipt this Period  
2400.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
George G. Beasley

Mailing Address 10 16th Ave S

City State Zip Code  
Naples FL 34102-7442

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

Name of Employer Beasley Broadcast Group, Inc. Occupation ceo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 16 / 2011

**Transaction ID:** 10406.C23439

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5905.00**

**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 10 / 106  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
George G. Beasley

Mailing Address 10 16th Ave S

City Naples State FL Zip Code 34102-7442

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

Name of Employer Beasley Broadcast Group, Inc. Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 03 / 16 / 2011  
**Transaction ID:** 10406.C23466  
Amount of Each Receipt this Period 100.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Shirley Beasley

Mailing Address 3033 Riviera Drive Suite 200

City Naples State FL Zip Code 34103

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

Name of Employer Homemaker Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 16 / 2011  
**Transaction ID:** 10406.C23464  
Amount of Each Receipt this Period 2400.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Nick Beckwith III

Mailing Address 1 Little Ln

City Pittsburgh State PA Zip Code 15215-1552

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

Name of Employer Arch Street Management Occupation chairman

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 01 / 17 / 2011  
**Transaction ID:** 10131.C22959  
Amount of Each Receipt this Period 1000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**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 11 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Eugene Blanchard

Mailing Address 2509 Augusta Drive

City State Zip Code  
Naples FL 34109

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 4 / 2 0 1 1

**Transaction ID:** 10215.C23004

Amount of Each Receipt this Period  
300.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Stefan Bothe

Mailing Address PO Box 1709

City State Zip Code  
Naples FL 34106-1709

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

Name of Employer Occupation  
Flexi Software ceo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

**Transaction ID:** 10413.C23588

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Stefan Bothe

Mailing Address PO Box 1709

City State Zip Code  
Naples FL 34106-1709

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

Name of Employer Occupation  
Flexi Software ceo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 1 1

**Transaction ID:** 10406.C23535

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5300.00**

**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 12 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
David Brown, III

Mailing Address 2665 Oak Ridge Ct

City State Zip Code  
Fort Myers FL 33901-9389

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

Name of Employer Occupation  
Eye Centers of Florida physician

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2011

**Transaction ID:** 10406.C23540

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 4015 Palm Tree Blvd # 300

City State Zip Code  
Cape Coral FL 33904-8458

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

Name of Employer Occupation  
self-employed physician

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 30 / 2011

**Transaction ID:** 10406.C23578

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Patrick Burns

Mailing Address 35 Parkview Ave Apt 5H

City State Zip Code  
Bronxville NY 10708-2963

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 28 / 2011

**Transaction ID:** 10406.C23251

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**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 13 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Arthur Choate

Mailing Address 1390 S Dixie Hwy Ste 2221

City State Zip Code  
Miami FL 33146-2946

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

Name of Employer Artmarina, Inc. Occupation boat charters

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 7 / 2 0 1 1

**Transaction ID:** 10131.C22973

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Arthur Choate

Mailing Address 1390 S Dixie Hwy Ste 2221

City State Zip Code  
Miami FL 33146-2946

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

Name of Employer Artmarina, Inc. Occupation boat charters

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 0 4 / 2 0 1 1

**Transaction ID:** 10218.C23065

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Pat Corrigan

Mailing Address P. O. Box 690068

City State Zip Code  
Vero Beach FL 32969

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

Name of Employer self-employed Occupation grower/rancher

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 1 1

**Transaction ID:** 10406.C23458

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Lanny Davis  
Mailing Address 1152 15th St., NW  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lanny J Davis and Associates Occupation principal  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 02 / 14 / 2011  
Transaction ID: 10217.C23043  
Amount of Each Receipt this Period 500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
John Donahue  
Mailing Address 100 Bay Road  
City Naples State FL Zip Code 34102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Federated Investors Occupation Chairman of the Board  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1565.36  
Date of Receipt 01 / 23 / 2011  
Transaction ID: 10413.C23598  
Amount of Each Receipt this Period 1565.36  
In-Kind  
Inkind: Catering

**C.** Full Name (Last, First, Middle Initial)  
John Donahue  
Mailing Address 100 Bay Road  
City Naples State FL Zip Code 34102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Federated Investors Occupation Chairman of the Board  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2365.36  
Date of Receipt 03 / 14 / 2011  
Transaction ID: 10413.C23597  
Amount of Each Receipt this Period 800.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2865.36  
**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 15 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Rhodora J. Donahue

Mailing Address 100 Bay Road

City State Zip Code  
Naples FL 34102-7902

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2011

**Transaction ID:** 10406.C23441

Amount of Each Receipt this Period  
2400.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Edward Droste

Mailing Address 107 Hampton Rd

City State Zip Code  
Clearwater FL 33759-4957

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

Name of Employer Occupation  
Provident Companies president

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 21 / 2011

**Transaction ID:** 10406.C23490

Amount of Each Receipt this Period  
2000.00

Receipt

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

Mailing Address 9014 Nomini Ln

City State Zip Code  
Alexandria VA 22309-2811

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

Name of Employer Occupation  
Dunkel Government Relations lobbyist

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 14 / 2011

**Transaction ID:** 10217.C23042

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4650.00**

**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 16 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) Charlotte D. Edwards</p> <p>Mailing Address 3931 SE 21st Pl.</p> <p>City State Zip Code Cape Coral FL 33904</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation Occupation attorney</p> <p>Receipt For: 2012 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table> </p> <p><b>Transaction ID:</b> 10406.C23543</p> <p>Amount of Each Receipt this Period  <table border="1" style="width:100%; text-align: right;"> <tr><td>500.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	1	1	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	8		2	0	1	1													
500.00																						

<p><b>B.</b> Full Name (Last, First, Middle Initial) David C. Farrell</p> <p>Mailing Address 1220 Log Cabin Lane</p> <p>City State Zip Code Saint Louis MO 63124</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer retired Occupation Occupation retired</p> <p>Receipt For: 2012 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table> </p> <p><b>Transaction ID:</b> 10406.C23476</p> <p>Amount of Each Receipt this Period  <table border="1" style="width:100%; text-align: right;"> <tr><td>1000.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	1	1	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	3		2	0	1	1													
1000.00																						

<p><b>C.</b> Full Name (Last, First, Middle Initial) Aubrey Ferrao</p> <p>Mailing Address 800 Spyglass Ln</p> <p>City State Zip Code Naples FL 34102-7731</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Gulf Bay Management, Inc Occupation Occupation developer</p> <p>Receipt For: 2012 Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr> </table> </p> <p><b>Transaction ID:</b> 10215.C22994</p> <p>Amount of Each Receipt this Period  <table border="1" style="width:100%; text-align: right;"> <tr><td>2400.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	1	1	2400.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	1		2	0	1	1													
2400.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width:100%;"><tr><td>3900.00</td></tr></table>	3900.00
3900.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width:100%;"><tr><td> </td></tr></table>	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
J. Cary Findlay  
Mailing Address 242 S. Washington Blvd., Unit #175  
City Sarasota State FL Zip Code 34236  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
Date of Receipt: 02 / 24 / 2011  
Transaction ID: 10406.C23292  
Amount of Each Receipt this Period: 250.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
John E. Flatley  
Mailing Address 230 Pembroke Dr.  
City Lake Forest State IL Zip Code 60045  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
Date of Receipt: 03 / 10 / 2011  
Transaction ID: 10406.C23438  
Amount of Each Receipt this Period: 250.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Leslie Fogg  
Mailing Address 4295 Cutlass Lane  
City Naples State FL Zip Code 34102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation homemaker  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
Date of Receipt: 03 / 22 / 2011  
Transaction ID: 10413.C23589  
Amount of Each Receipt this Period: 2500.00  
Receipt

**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 18 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Leslie Fogg

Mailing Address 4295 Cutlass Lane

City State Zip Code  
Naples FL 34102

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

Name of Employer Occupation  
Homemaker homemaker

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 22 / 2011

**Transaction ID:** 10406.C23480

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Joseph Fogg III

Mailing Address 4295 Cutlass Lane

City State Zip Code  
Naples FL 34102

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

Name of Employer Occupation  
J. G. Fogg & Co., Inc. private equity

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 22 / 2011

**Transaction ID:** 10413.C23590

Amount of Each Receipt this Period  
2500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Joseph Fogg III

Mailing Address 4295 Cutlass Lane

City State Zip Code  
Naples FL 34102

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

Name of Employer Occupation  
J. G. Fogg & Co., Inc. private equity

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 22 / 2011

**Transaction ID:** 10406.C23481

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 19 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Jean Friend

Mailing Address 4461 SW Parkgate Blvd

City State Zip Code  
Palm City FL 34990

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

**Transaction ID:** 10406.C23566

Amount of Each Receipt this Period  
250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Frank H. Galeana, Jr.

Mailing Address 14299 Reflection Lakes Dr.

City State Zip Code  
Fort Myers FL 33907

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

Name of Employer Information Requested Occupation Information Requested  
Galeana Chrysler jeep dodge owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	1	1

**Transaction ID:** 10406.C23523

Amount of Each Receipt this Period  
2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Sam Galloway

Mailing Address P. O. Box 70

City State Zip Code  
Fort Myers FL 33902

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

Name of Employer Information Requested Occupation Information Requested  
self-employed auto dealer

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

**Transaction ID:** 10406.C23534

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5250.00**

**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 20 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

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

Mailing Address 5005 Yacht Club Rd

City State Zip Code  
Jacksonville FL 32210-8321

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 06 / 2011

**Transaction ID:** 10406.C23414

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Thomas Grady

Mailing Address P.O. Box 10

City State Zip Code  
Naples FL 34106

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

Name of Employer Occupation  
self-employed attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 23 / 2011

**Transaction ID:** 10131.C22968

Amount of Each Receipt this Period  
2400.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
James T. Harper

Mailing Address 1162 Country Club Cir.

City State Zip Code  
Birmingham AL 35244

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2011

**Transaction ID:** 10406.C23514

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3400.00**

**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 21 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Lowell L. Hart

Mailing Address 13733 Pine Villa Lane

City State Zip Code  
Fort Myers FL 33912

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

Name of Employer Information Requested Occupation  
doctor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2011

**Transaction ID:** 10406.C23517

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
William N. Harwin

Mailing Address 14270 Royal Harbour Ct.  
Unit 1021

City State Zip Code  
Fort Myers FL 33908-6577

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

Name of Employer Florida Cancer Specialists Occupation  
physician

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2011

**Transaction ID:** 10406.C23509

Amount of Each Receipt this Period  
250.00

Receipt

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

Mailing Address P.O. Box 1506

City State Zip Code  
Boca Grande FL 33921

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

Name of Employer retired Occupation  
retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 14 / 2011

**Transaction ID:** 10310.C23072

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**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 22 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
James Hovey  
Mailing Address 4180 Cutlass Lane  
City Naples State FL Zip Code 34102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation consultant  
Receipt For: 2012 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2500.00  
Date of Receipt 03 / 28 / 2011  
Transaction ID: 10406.C23475  
Amount of Each Receipt this Period 2500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
James Humphrey  
Mailing Address 2235 First Street  
City Fort Myers State FL Zip Code 33901-4921  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fowler White Boggs Banker PA Occupation attorney  
Receipt For: 2012 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 03 / 26 / 2011  
Transaction ID: 10406.C23507  
Amount of Each Receipt this Period 1000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael Katin  
Mailing Address 2234 Colonial Blvd.  
City Fort Myers State FL Zip Code 33907  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Radiation Therapy Associates Occupation physician  
Receipt For: 2012 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2500.00  
Date of Receipt 03 / 25 / 2011  
Transaction ID: 10406.C23489  
Amount of Each Receipt this Period 2500.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6000.00  
**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 23 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
John Kelly  
Mailing Address 3645 Kanawha St NW  
City Washington State DC Zip Code 20015-1709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The McPherson Group LLP Occupation partner  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00  
Date of Receipt 03 / 30 / 2011  
Transaction ID: 10406.C23579  
Amount of Each Receipt this Period 2500.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Susan Khosrowzadeh  
Mailing Address 3701 Coastal View Dr.  
City Jacksonville Beach State FL Zip Code 32250  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 03 / 17 / 2011  
Transaction ID: 10406.C23457  
Amount of Each Receipt this Period 250.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Alan Klutch  
Mailing Address 2454 Harbour Ln  
City Sanibel State FL Zip Code 33957-2029  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 01 / 28 / 2011  
Transaction ID: 10215.C23032  
Amount of Each Receipt this Period 500.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00  
**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 24 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Tom Kukk

Mailing Address 3660 Gin Ln

City Naples State FL Zip Code 34102-7816

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 20 / 2011  
**Transaction ID:** 10406.C23487  
 Amount of Each Receipt this Period: 2500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Tom Kukk

Mailing Address 3660 Gin Ln

City Naples State FL Zip Code 34102-7816

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 03 / 20 / 2011  
**Transaction ID:** 10413.C23591  
 Amount of Each Receipt this Period: 2500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Bruce A. Lambrecht

Mailing Address 901 South 2nd Street Unit 902

City Minneapolis State MN Zip Code 55415

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

Name of Employer Information Requested Occupation real estate

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** 10406.C23524  
 Amount of Each Receipt this Period: 250.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5250.00**

**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 25 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Ned Lautenbach

Mailing Address 1801 Galleon Dr

City State Zip Code  
Naples FL 34102-7761

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

Name of Employer Self Employed      Occupation private equity

Receipt For: 2012      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	9	/	2	0	1	1

**Transaction ID:** 10218.C23051

Amount of Each Receipt this Period  
2400.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
J. Robert Long

Mailing Address 2443 SW Pine Island Rd

City State Zip Code  
Cape Coral FL 33991-1282

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

Name of Employer Marine Concepts      Occupation owner

Receipt For: 2012      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	1

**Transaction ID:** 10406.C23526

Amount of Each Receipt this Period  
2500.00

Receipt

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

Mailing Address 2115 Linwood Avenue Suite 110

City State Zip Code  
Fort Lee NJ 07024

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

Name of Employer Mack Company      Occupation executive

Receipt For: 2012      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	1

**Transaction ID:** 10310.C23187

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5900.00**

**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 26 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Connie Mack III

Mailing Address PO Box 3729

City State Zip Code  
Placida FL 33946-3729

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

Name of Employer Occupation  
King & Spalding LLP consultant

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2011

**Transaction ID:** 10406.C23536

Amount of Each Receipt this Period  
2500.00

Receipt

**B.**

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

Mailing Address 14641 Johnathan Harbour Dr.

City State Zip Code  
Fort Myers FL 33908

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

Name of Employer Occupation  
Marazzi Nissan owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 29 / 2011

**Transaction ID:** 10406.C23533

Amount of Each Receipt this Period  
500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Kurt Markgraf

Mailing Address 3663 McKinley Ave

City State Zip Code  
Fort Myers FL 33901-7813

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

Name of Employer Occupation  
Self Employed anesthesiologist

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2011

**Transaction ID:** 10406.C23542

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**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 27 / 106

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Michael McCleod

Mailing Address 10070 Magnolia Pointe

City State Zip Code  
Fort Myers FL 33919-4218

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

Name of Employer Occupation  
Florida Cancer Specialists physician

Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2011

Transaction ID: 10406.C23516

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Alvin McQuinn

Mailing Address 1551 Gulf Shore Blvd S

City State Zip Code  
Naples FL 34102-7454

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 11 / 2011

Transaction ID: 10131.C22954

Amount of Each Receipt this Period

2400.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Mary McQuinn

Mailing Address 1551 Gulf Shore Blvd S

City State Zip Code  
Naples FL 34102-7454

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 11 / 2011

Transaction ID: 10131.C22955

Amount of Each Receipt this Period

2400.00

Receipt

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

5300.00

**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 28 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Timothy Meade

Mailing Address 2841 SE 19th Place

City State Zip Code  
Fort Myers FL 33919

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

Name of Employer Millicorp Occupation president

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2011

**Transaction ID:** 10406.C23585

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Frank Meak

Mailing Address 25 Mill Ln.

City State Zip Code  
Huntington NY 11743

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

Name of Employer N Development Occupation development

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2011

**Transaction ID:** 10406.C23512

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Muhammed Y. Memon

Mailing Address 2400 Harbor Blvd., #10

City State Zip Code  
Port Charlotte FL 33952

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

Name of Employer Self Employed Occupation physician

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 01 / 2011

**Transaction ID:** 10406.C23371

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**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 29 / 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Randall Mercer	Date of Receipt MM / DD / YYYY 03 / 24 / 2011
	Mailing Address 16465 Rainbow Meadows Court	<b>Transaction ID:</b> 10406.C23584
	City State Zip Code Fort Myers FL 33908	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: C.B. Richard Ellis    Occupation: real estate Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼    Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Barton S. Mitchell	Date of Receipt MM / DD / YYYY 03 / 03 / 2011
	Mailing Address P.O. Box 1247	<b>Transaction ID:</b> 10406.C23406
	City State Zip Code Brooklandville MD 21022	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: retired    Occupation: retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼    Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Nathan	Date of Receipt MM / DD / YYYY 03 / 30 / 2011
	Mailing Address 14621 Highland Harbour Ct	<b>Transaction ID:</b> 10406.C23586
	City State Zip Code Fort Myers FL 33908-4938	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer: Lee Memorial Health Systems    Occupation: hospital administrator Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼    Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> 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 30 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Dan Page

Mailing Address 3000 Hamill Road

City Hixson State TN Zip Code 37343

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

Name of Employer Self Employed Occupation healthcare

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 26 / 2011  
**Transaction ID:** 10406.C23515  
 Amount of Each Receipt this Period: 500.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Alfonso J. Perez

Mailing Address 283 Catalonia Avenue

City Coral Gables State FL Zip Code 33134

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

Name of Employer Rasco Reininger Occupation attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 28 / 2011  
**Transaction ID:** 10406.C23470  
 Amount of Each Receipt this Period: 500.00  
 Receipt

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

Mailing Address 2326 Del Prado Blvd S

City Cape Coral State FL Zip Code 33990

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

Name of Employer Re/Max Realty Occupation broker

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 21 / 2011  
**Transaction ID:** 10406.C23574  
 Amount of Each Receipt this Period: 250.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**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 31 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Paul Polley

Mailing Address 467 Meadow Lark Dr

City State Zip Code  
Sarasota FL 34236-1901

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2011

**Transaction ID:** 10310.C23150

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Joan Reese

Mailing Address 15736 Glenside Way

City State Zip Code  
Fort Myers FL 33912

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

Name of Employer Occupation  
Self Employed builder

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2011

**Transaction ID:** 10406.C23556

Amount of Each Receipt this Period  
350.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Francis Rooney

Mailing Address 800 Admiralty Parade

City State Zip Code  
Naples FL 34102-7875

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

Name of Employer Occupation  
Rooney Holdings, Inc. president

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2011

**Transaction ID:** 10406.C23477

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3100.00**

**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 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Francis Rooney

Mailing Address 800 Admiralty Parade

City State Zip Code  
Naples FL 34102-7875

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

Name of Employer: Rooney Holdings, Inc. Occupation: president

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 03 / 26 / 2011  
**Transaction ID:** 10413.C23592  
 Amount of Each Receipt this Period: 2500.00  
 Receipt

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

Mailing Address 800 Admiralty Parade

City State Zip Code  
Naples FL 34102-7875

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

Name of Employer: Homemaker Occupation: homemaker

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 28 / 2011  
**Transaction ID:** 10413.C23593  
 Amount of Each Receipt this Period: 2500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kathleen Rooney

Mailing Address 800 Admiralty Parade

City State Zip Code  
Naples FL 34102-7875

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

Name of Employer: Homemaker Occupation: homemaker

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 03 / 28 / 2011  
**Transaction ID:** 10406.C23478  
 Amount of Each Receipt this Period: 2500.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 33 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

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

Mailing Address 1081 Spanish Moss Trl

City State Zip Code  
Naples FL 34108-2415

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

Name of Employer Occupation  
Miromar Development developer

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2011

**Transaction ID:** 10406.C23513

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 330 S Ocean Blvd Apt 3B

City State Zip Code  
Palm Beach FL 33480-4263

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 20 / 2011

**Transaction ID:** 10310.C23112

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Herbert J. Rowe

Mailing Address 4601 Gulf Shore Blvd N Apt. 12

City State Zip Code  
Naples FL 34103-2214

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 23 / 2011

**Transaction ID:** 10310.C23122

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**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 34 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Judith Royal

Mailing Address 15880 Summerlin Rd Ste 300PMB

City State Zip Code  
Fort Myers FL 33908-9612

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2011

**Transaction ID:** 10218.C23066

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Shawn Seliger

Mailing Address PO Box 07074

City State Zip Code  
Fort Myers FL 33919-0074

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

Name of Employer Occupation  
Self Employed attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2011

**Transaction ID:** 10406.C23576

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Parks Shackelford

Mailing Address 3001 N. Monroe St.

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Florida Crystals Corporation vice president

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 29 / 2011

**Transaction ID:** 10406.C23469

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Constance Shank

Mailing Address 23773 Creek Branch Ln

City State Zip Code  
Bonita Springs FL 34135-4013

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

Name of Employer Occupation  
retired retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 8 / 2 0 1 1

Transaction ID: 10215.C23026

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Rodger D. Shay

Mailing Address 13635 Deering Bay Drive  
PH 293

City State Zip Code  
Coral Gables FL 33156

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

Name of Employer Occupation  
Shay Investment Services, Inc. investment advisor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 1 1

Transaction ID: 10406.C23567

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Herbert J. Siegel

Mailing Address 190 E. 72nd Street, #28D

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
n/a retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 5 / 2 0 1 1

Transaction ID: 10215.C23037

Amount of Each Receipt this Period  
1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**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 36 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Theodore P. Sottong

Mailing Address 15645 Ocean Walk Cir.  
Apt. 109

City State Zip Code  
Fort Myers FL 33908

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

Name of Employer Information Requested Occupation  
architecture

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 26 / 2011

**Transaction ID:** 10406.C23508

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 1285 Gulf Shore Blvd. North  
Apt. 7-A

City State Zip Code  
Naples FL 34102

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

Name of Employer Tweedy Browne Co. Occupation  
Investment Manager

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 28 / 2011

**Transaction ID:** 10310.C23128

Amount of Each Receipt this Period  
2400.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Margaret Sulick

Mailing Address 3295 Fort Charles Dr

City State Zip Code  
Naples FL 34102-7924

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

Name of Employer City of Naples Occupation  
Naples City Council

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 23 / 2011

**Transaction ID:** 10131.C22971

Amount of Each Receipt this Period  
2400.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5300.00**

**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 37 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Peter Sulick, Jr.

Mailing Address 3295 Fort Charles Dr

City State Zip Code  
Naples FL 34102-7924

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

Name of Employer Occupation  
Ammersite LLC venture capital

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 3 / 2 0 1 1

Transaction ID: 10131.C22970

Amount of Each Receipt this Period

2400.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Jenny Sutton

Mailing Address 715 10th St S

City State Zip Code  
Naples FL 34102-6725

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

Name of Employer Occupation  
Self Employed investor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 2 / 2 0 1 1

Transaction ID: 10131.C22957

Amount of Each Receipt this Period

2400.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jenny Sutton

Mailing Address 715 10th St S

City State Zip Code  
Naples FL 34102-6725

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

Name of Employer Occupation  
Self Employed investor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 1

Transaction ID: 10413.C23595

Amount of Each Receipt this Period

100.00

Receipt

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

4900.00

**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 38 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Jenny Sutton  
Mailing Address 715 10th St S  
City Naples State FL Zip Code 34102-6725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation investor  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4800.00  
Date of Receipt 03 / 24 / 2011  
Transaction ID: 10413.C23596  
Amount of Each Receipt this Period 2300.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Kermit S. Sutton  
Mailing Address 715 10th St S  
City Naples State FL Zip Code 34102-6725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation investor  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2400.00  
Date of Receipt 01 / 12 / 2011  
Transaction ID: 10131.C22956  
Amount of Each Receipt this Period 2400.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kermit S. Sutton  
Mailing Address 715 10th St S  
City Naples State FL Zip Code 34102-6725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation investor  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00  
Date of Receipt 03 / 24 / 2011  
Transaction ID: 10406.C23482  
Amount of Each Receipt this Period 100.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4800.00  
**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  
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FOR LINE NUMBER: PAGE 39 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Kermit S. Sutton

Mailing Address 715 10th St S

City State Zip Code  
Naples FL 34102-6725

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

Name of Employer Occupation  
Self Employed investor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 24 / 2011

Transaction ID: 10413.C23594

Amount of Each Receipt this Period  
2500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Stanley Tate

Mailing Address 1175 NE 125th St Ste 102

City State Zip Code  
Miami FL 33161-5009

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

Name of Employer Occupation  
self-employed developer

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 14 / 2011

Transaction ID: 10215.C23008

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Robert M. Taylor

Mailing Address 13451 McGregor Blvd.  
#27

City State Zip Code  
Fort Myers FL 33919-5942

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

Name of Employer Occupation  
Meristar Hotels and Resor- consultant  
ts

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 21 / 2011

Transaction ID: 10406.C23434

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

**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 40 / 106  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Maureen Valiquette

Mailing Address 1206 Bay Drive

City State Zip Code  
Sanibel FL 33957-3504

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

Name of Employer Sandcastle Construction Co. In Occupation office manager

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	1	1

Transaction ID: 10406.C23525

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Fernando J. Valverde

Mailing Address 275 Costanera Rd.

City State Zip Code  
Miami FL 33143

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

Name of Employer FIU College of Healthcare Occupation physician

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	1	1

Transaction ID: 10406.C23471

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Roger Vasey

Mailing Address 3580 Gin Ln

City State Zip Code  
Naples FL 34102-7815

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

Name of Employer Self Employed Occupation investments

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: 10406.C23531

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

**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 41 / 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Sandra Vasey		Date of Receipt
	Mailing Address 3580 Gin Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2011
	City	State	Zip Code
	Naples	FL	34102-7815
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10406.C23532
Name of Employer Homemaker		Occupation homemaker	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> Amount <input type="text"/> 2500.00
			Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Augusto Villalon		Date of Receipt
	Mailing Address 3859 Cruz Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2011
	City	State	Zip Code
	Saint James City	FL	33956-2276
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10406.C23518
Name of Employer Self Employed		Occupation Engineer/Consultant	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> Amount <input type="text"/> 250.00
			Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Gail Weiss		Date of Receipt
	Mailing Address 421 Palo Verde Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2011
	City	State	Zip Code
	Naples	FL	34119-1804
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10406.C23580
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> Amount <input type="text"/> 2500.00
			Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 5250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 42 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Anne Wheeler

Mailing Address 736 Kingstown Drive

City State Zip Code  
Naples FL 34102

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

Name of Employer retired Occupation retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

**Transaction ID:** 10215.C23040

Amount of Each Receipt this Period  
2400.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Thomas B. Wheeler

Mailing Address 736 Kings Town Dr

City State Zip Code  
Naples FL 34102-7831

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

Name of Employer retired Occupation retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

**Transaction ID:** 10215.C23039

Amount of Each Receipt this Period  
2400.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jovan Zepcevski

Mailing Address 7802 Jean Blvd

City State Zip Code  
Fort Myers FL 33967-6015

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

Name of Employer Zep Construction, Inc. Occupation Marine Contractor

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 2 / 2 0 1 1

**Transaction ID:** 10310.C23163

Amount of Each Receipt this Period  
500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5300.00**

**TOTAL** This Period (last page this line number only) ..... ► **153570.36**

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

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

FOR LINE NUMBER: PAGE 43 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
American Dental Political Action

Mailing Address 111 14th Street, NW  
Suite 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2011

Transaction ID: 10406.C23484

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Arent Fox Civic Participation Fund

Mailing Address 1050 Connecticut Avenue, NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00241380

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2011

Transaction ID: 10406.C23479

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
B & D Pac

Mailing Address 1050 K St NW Suite 400

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 08 / 2011

Transaction ID: 10217.C23044

Amount of Each Receipt this Period

1000.00

Receipt

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Cigar PAC

Mailing Address 818 Connecticut Ave NW Ste 200

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00121350

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 1 1

Transaction ID: 10414.C23600

Amount of Each Receipt this Period

250.00

In-Kind

INKIND: Catering for event

**B.**

Full Name (Last, First, Middle Initial)  
Comcast Corporation PAC

Mailing Address 1701 JFK Boulevard

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 1

Transaction ID: 10406.C23465

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
ExxonMobil Corporation PAC

Mailing Address 5959 Las Colinas Blvd

City State Zip Code  
Irving TX 75039-4202

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 1 1

Transaction ID: 10406.C23285

Amount of Each Receipt this Period

2000.00

Receipt

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

4750.00

**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 45 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

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

Mailing Address 942 S. Shady Grove Road  
First Floor

City State Zip Code  
Memphis TN 38120

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 1 6 / 2 0 1 1

**Transaction ID:** 10406.C23239

Amount of Each Receipt this Period  
3000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Free And Strong America Pac, Inc

Mailing Address PO Box 79226

City State Zip Code  
Waverley MA 02479-0226

FEC ID number of contributing federal political committee. **C** C00449280

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 2 0 / 2 0 1 1

**Transaction ID:** 10131.C22972

Amount of Each Receipt this Period  
2000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Goldman Sachs Group, Inc. PAC

Mailing Address 101 Constitution Ave., NW  
Suite 100E

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 0 1 / 2 0 1 1

**Transaction ID:** 10406.C23380

Amount of Each Receipt this Period  
2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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 46 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Holland & Knight CCE  
Mailing Address 315 S. Calhoun Street, #600  
City Tallahassee State FL Zip Code 32301  
FEC ID number of contributing federal political committee. **C** C00171330  
Name of Employer n/a Occupation political committee  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00  
Date of Receipt 02 / 18 / 2011  
Transaction ID: 10406.C23485  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC  
Mailing Address 101 Constitution Ave NW Ste 500 W  
City Washington State DC Zip Code 20001-2133  
FEC ID number of contributing federal political committee. **C** C00096156  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
5000.00  
Date of Receipt 02 / 28 / 2011  
Transaction ID: 10406.C23382  
Amount of Each Receipt this Period 5000.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC  
Mailing Address 101 Constitution Ave NW Ste 500 W  
City Washington State DC Zip Code 20001-2133  
FEC ID number of contributing federal political committee. **C** C00096156  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
10000.00  
Date of Receipt 02 / 28 / 2011  
Transaction ID: 10406.C23378  
Amount of Each Receipt this Period 5000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00  
**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 47 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Ind. Insurance Agents of America PAC  
Mailing Address 412 1st Street, S.E. , #300  
City Washington State DC Zip Code 20003  
FEC ID number of contributing federal political committee. **C** C00022343  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 03 / 2011  
Transaction ID: 10406.C23431  
Amount of Each Receipt this Period 1000.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
KochPAC  
Mailing Address 655 15th St NW Ste 445  
City Washington State DC Zip Code 20005-5727  
FEC ID number of contributing federal political committee. **C** C00236489  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 02 / 17 / 2011  
Transaction ID: 10406.C23379  
Amount of Each Receipt this Period 2500.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Emp. PAC  
Mailing Address 1550 Crystal Drive  
Crystal Square Two, Suite 300  
City Arlington State VA Zip Code 22202  
FEC ID number of contributing federal political committee. **C** C00303024  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 03 / 2011  
Transaction ID: 10406.C23381  
Amount of Each Receipt this Period 1000.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00  
**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 48 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way

City State Zip Code  
Redmond WA 98073-9717

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 01 / 2011

**Transaction ID:** 10406.C23429

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Asso. PAC

Mailing Address 1100 King St Ste 600

City State Zip Code  
Alexandria VA 22314-2925

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 20 / 2011

**Transaction ID:** 10406.C23463

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
OSI Restaurant Partners, LLC PAC

Mailing Address 2202 N. West Shore Blvd.  
5th Floor

City State Zip Code  
Tampa FL 33607

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 10 / 2011

**Transaction ID:** 10406.C23390

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00

**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 49 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
Power PAC of the Edison Electric Inst.  
Mailing Address 701 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

**Transaction ID:** 10406.C23506  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt

**B.** Full Name (Last, First, Middle Initial)  
Progress Energy Employees Federal PAC  
Mailing Address 801 Pennsylvania Ave NW Ste 250

City State Zip Code  
Washington DC 20004-2681

FEC ID number of contributing federal political committee. **C** C00091884

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	1	/	2	0	1	1

**Transaction ID:** 10406.C23331  
 Amount of Each Receipt this Period  
 2500.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Realtors Political Action Committee  
Mailing Address 430 N. Michigan Avenue

City State Zip Code  
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	1	1

**Transaction ID:** 10310.C23126  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**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 50 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.** Full Name (Last, First, Middle Initial)  
The American Gaming Association PAC

Mailing Address 1299 Pennsylvania Ave., NW  
Suite 1175

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00309146

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 01 / 2011  
**Transaction ID:** 10406.C23430  
 Amount of Each Receipt this Period: 250.00  
 Receipt

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

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328-3474

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2011  
**Transaction ID:** 10406.C23505  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**C.** Full Name (Last, First, Middle Initial)  
Walt Disney Co. Employees PAC

Mailing Address 425 3rd St., SW  
Suite 1100

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 30 / 2011  
**Transaction ID:** 10406.C23528  
 Amount of Each Receipt this Period: 1000.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 106  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Wine & Spirits Wholesalers of Amer. PAC

Mailing Address 805 15th St NW Ste 430

City State Zip Code  
Washington DC 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2011

Transaction ID: 10406.C23483

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	49500.00

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

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

FOR LINE NUMBER: PAGE 52 / 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Fort Myers Little League

Mailing Address 2952 Jackson Street

City State Zip Code  
Fort Myers FL 33901-

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	1

Transaction ID: 10406.C23468

Amount of Each Receipt this Period  
1750.00

Offsets to Operating Expenditure

NOTE:Uncashed check (12-2-0-10)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1750.00

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b> Full Name (Last, First, Middle Initial) Doyle Bartlett <hr/> Mailing Address 609 Oakley Pl <hr/> City Alexandria State VA Zip Code 22302-3611 <hr/> Purpose of Disbursement Inkind: event catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10413.C23599IK Date of Disbursement MM / DD / YYYY 03 / 29 / 2011
	Amount of Each Disbursement this Period 1005.00
	IN KIND: INKIND: EVENT CA- TERING
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Collier Co Rep Executive Committee <hr/> Mailing Address P. O. Box 7367 <hr/> City Naples State FL Zip Code 34101- <hr/> Purpose of Disbursement Reception ticket and program ad Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6067 Date of Disbursement MM / DD / YYYY 01 / 25 / 2011
	Amount of Each Disbursement this Period 1000.00
	RECEPTION TICKET AND PROG- RAM AD
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) John Donahue <hr/> Mailing Address 100 Bay Road <hr/> City Naples State FL Zip Code 34102- <hr/> Purpose of Disbursement Inkind: Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10413.C23598IK Date of Disbursement MM / DD / YYYY 01 / 23 / 2011
	Amount of Each Disbursement this Period 1565.36
	IN KIND: INKIND: CATERING
	Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3570.36**

**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)

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

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. David James</p> <p>Mailing Address 401 12th St S #1102</p> <p>City Arlington State VA Zip Code 22202-</p> <p>Purpose of Disbursement communications consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10131.E6006</p> <p>Date of Disbursement 01 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>COMMUNICATIONS CONSULTANT</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. David James</p> <p>Mailing Address 401 12th St S #1102</p> <p>City Arlington State VA Zip Code 22202-</p> <p>Purpose of Disbursement communications consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6071</p> <p>Date of Disbursement 02 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>COMMUNICATIONS CONSULTANT</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. David James</p> <p>Mailing Address 401 12th St S #1102</p> <p>City Arlington State VA Zip Code 22202-</p> <p>Purpose of Disbursement communications consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10310.E6151</p> <p>Date of Disbursement 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 3500.00</p> <p>COMMUNICATIONS CONSULTANT</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8500.00

**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)

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

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

NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Mr. Rob Jennings

Transaction ID: 10131.E6004  
Date of Disbursement

Mailing Address 501 L St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	1

City Washington State DC Zip Code 20001-3670

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
fundraising consultant  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTANT

B.

Full Name (Last, First, Middle Initial)  
Mr. Rob Jennings

Transaction ID: 10215.E6069  
Date of Disbursement

Mailing Address 501 L St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	1

City Washington State DC Zip Code 20001-3670

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
fundraising consulting  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTING

C.

Full Name (Last, First, Middle Initial)  
Mr. Rob Jennings

Transaction ID: 10310.E6149  
Date of Disbursement

Mailing Address 501 L St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	1

City Washington State DC Zip Code 20001-3670

Amount of Each Disbursement this Period

1017.07
---------

Purpose of Disbursement  
expense reimbursement - travel  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

EXPENSE REIMBURSEMENT - TRAVEL

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

4017.07
---------

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Mr. Rob Jennings

Transaction ID: 10310.E6148  
Date of Disbursement

Mailing Address 501 L St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	1

City Washington State DC Zip Code 20001-3670

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
fundraising consultant  
Candidate Name

Category/ Type
-------------------

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTANT

B.

Full Name (Last, First, Middle Initial)  
Mr. Patrick McQuillan

Transaction ID: 10131.E6005  
Date of Disbursement

Mailing Address 1040 Hampton Cir

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	1

City Naples State FL Zip Code 34105-4821

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
fundraising consultant  
Candidate Name

Category/ Type
-------------------

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTANT

C.

Full Name (Last, First, Middle Initial)  
Mr. Patrick McQuillan

Transaction ID: 10215.E6070  
Date of Disbursement

Mailing Address 1040 Hampton Cir

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	1

City Naples State FL Zip Code 34105-4821

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
fundraising consultant  
Candidate Name

Category/ Type
-------------------

Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  Primary  General  Other (specify) ▼

FUNDRAISING CONSULTANT

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

2500.00
---------

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

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# 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 / 106

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Patrick McQuillan  Mailing Address 1040 Hampton Cir  City Naples State FL Zip Code 34105-4821  Purpose of Disbursement fundraising consultant Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10310.E6150 Date of Disbursement 03 / 01 / 2011  Amount of Each Disbursement this Period 500.00  FUNDRAISING CONSULTANT
<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Donald Ortiz  Mailing Address 5630 Cedar Tree Ln  City Naples State FL Zip Code 34116-5453  Purpose of Disbursement event expense - musician Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6147 Date of Disbursement 02 / 10 / 2011  Amount of Each Disbursement this Period 700.00  EVENT EXPENSE - MUSICIAN
<b>C.</b>	Full Name (Last, First, Middle Initial) Cigar PAC  Mailing Address 818 Connecticut Ave NW Ste 200  City Washington State DC Zip Code 20006-  Purpose of Disbursement INKIND: Catering for event Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10414.C23600IK Date of Disbursement 02 / 18 / 2011  Amount of Each Disbursement this Period 250.00  IN KIND: INKIND: CATERING FOR EVENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express  Mailing Address P. O. Box 360002  City Fort Lauderdale State FL Zip Code 33336- Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6044 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 7873.31  CREDIT CARD: SEE BELOW	
<b>B.</b>	Full Name (Last, First, Middle Initial) US Airways  Mailing Address 7 Park Center  City Pittsburgh State PA Zip Code 15220- Purpose of Disbursement air travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6046 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 2594.60  [MEMO ITEM] MEMO: AIR TRAVEL	
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T Wireless  Mailing Address P. O. Box 8229  City Aurora State IL Zip Code 60572- Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6047 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 29.99  [MEMO ITEM] MEMO: TELEPHONE SERVICE	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7873.31

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Facebook Advertising

Mailing Address online vendor

City Washington State DC Zip Code 20036-

Purpose of Disbursement  
advertising

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6048  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

398.39
--------

[MEMO ITEM]  
MEMO: ADVERTISING

B.

Full Name (Last, First, Middle Initial)  
Frontier Airlines

Mailing Address 7001 Tower Road

City Denver State CO Zip Code 80249-

Purpose of Disbursement  
air travel

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6049  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

592.40
--------

[MEMO ITEM]  
MEMO: AIR TRAVEL

C.

Full Name (Last, First, Middle Initial)  
Taxicab

Mailing Address Various locations

City Washington State DC Zip Code 20002-

Purpose of Disbursement  
taxi services

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6050  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

117.77
--------

[MEMO ITEM]  
MEMO: TAXI SERVICES

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

0.00
------

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

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**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement express mail delivery Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6051 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 16.58  <b>[MEMO ITEM]</b> MEMO: EXPRESS MAIL DELIVERY	
<b>B.</b>	Full Name (Last, First, Middle Initial) Florida Business Information, Inc.  Mailing Address PO Box 193  City Bell State CA Zip Code 32619-0193  Purpose of Disbursement newspaper clipping service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6052 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 125.00  <b>[MEMO ITEM]</b> MEMO: NEWSPAPER CLIPPING SERVICE	
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address 131 North Court House Rd  City Arlington State VA Zip Code 22201-  Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6053 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 60.07  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Del Friscos  Mailing Address 1221 Avenue of the Americas  City New York State NY Zip Code 10020-  Purpose of Disbursement meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6056 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 197.02  <b>[MEMO ITEM]</b> MEMO: MEALS
<b>B.</b>	Full Name (Last, First, Middle Initial) Yuma Solutions, Inc.  Mailing Address 1922 Miccosukee Road  City Tallahassee State FL Zip Code 32308-  Purpose of Disbursement blackberry service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6058 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 312.00  <b>[MEMO ITEM]</b> MEMO: BLACKBERRY SERVICE
<b>C.</b>	Full Name (Last, First, Middle Initial) Capitol Hill Club  Mailing Address 300 1st St SE  City Washington State DC Zip Code 20003-1801  Purpose of Disbursement meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6059 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 109.03  <b>[MEMO ITEM]</b> MEMO: MEALS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
The Capital Grille

Mailing Address 601 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20004-

Purpose of Disbursement  
meals

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6061  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

932.38
--------

[MEMO ITEM]  
MEMO: MEALS

B.

Full Name (Last, First, Middle Initial)  
US House of Rep. Gift Shop

Mailing Address B-217 Longworth Bldg.

City Washington State DC Zip Code 20515-

Purpose of Disbursement  
campaign gifts

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6063  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

1874.00
---------

[MEMO ITEM]  
MEMO: CAMPAIGN GIFTS

C.

Full Name (Last, First, Middle Initial)  
Bistros Bis

Mailing Address 15 E Street, N.W.

City Washington State DC Zip Code 20001-

Purpose of Disbursement  
meals

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6064  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

141.83
--------

[MEMO ITEM]  
MEMO: MEALS

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

0.00
------

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

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Pinchers Crab Shack

Mailing Address 13021 N. Cleveland Ave.

City State Zip Code  
North Fort Myers FL 33903-

Purpose of Disbursement  
meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10131.E6065  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

201.00
--------

[MEMO ITEM]  
MEMO: MEALS

B.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P. O. Box 360002

City State Zip Code  
Fort Lauderdale FL 33336-

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6083  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

8606.52
---------

CREDIT CARD: SEE BELOW

C.

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P. O. Box 360002

City State Zip Code  
Fort Lauderdale FL 33336-

Purpose of Disbursement  
Annual Membership Fees

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6084  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

170.00
--------

[MEMO ITEM]  
MEMO: ANNUAL MEMBERSHIP FEES

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

8606.52
---------

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

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**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T Wireless</p> <p>Mailing Address P. O. Box 8229</p> <p>City Aurora State IL Zip Code 60572-</p> <p>Purpose of Disbursement telephone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6085</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="215.83"/></p> <p><b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Facebook Advertising</p> <p>Mailing Address online vendor</p> <p>City Washington State DC Zip Code 20036-</p> <p>Purpose of Disbursement advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6086</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1123.62"/></p> <p><b>[MEMO ITEM]</b> MEMO: ADVERTISING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) 7-Eleven</p> <p>Mailing Address 83 E Colonial Dr</p> <p>City Orlando State FL Zip Code 32801-1238</p> <p>Purpose of Disbursement fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6087</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="84.06"/></p> <p><b>[MEMO ITEM]</b> MEMO: FUEL</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>



# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Gulf Harbour Golf & Country Club <hr/> Mailing Address 14500 Vista River Dr <hr/> City Fort Myers State FL Zip Code 33908-7911 <hr/> Purpose of Disbursement Constituent Christmas Party Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6090 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 560.69 <hr/> <b>[MEMO ITEM]</b> MEMO: CONSTITUENT CHRISTMAS PARTY
<b>B.</b>	Full Name (Last, First, Middle Initial) Hotels.com <hr/> Mailing Address online website <hr/> City Washington State DC Zip Code 20002- <hr/> Purpose of Disbursement lodging Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6091 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 688.82 <hr/> <b>[MEMO ITEM]</b> MEMO: LODGING
<b>C.</b>	Full Name (Last, First, Middle Initial) Southwest Florida International Airport <hr/> Mailing Address 11000 Terminal Access Rd Ste 8671 <hr/> City Fort Myers State FL Zip Code 33913-8213 <hr/> Purpose of Disbursement parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6092 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 15.00 <hr/> <b>[MEMO ITEM]</b> MEMO: PARKING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: 10215.E6093 Date of Disbursement 02 / 07 / 2011
	Mailing Address 60 Massachusetts Ave NE	Amount of Each Disbursement this Period 1016.00
	City Washington State DC Zip Code 20002-4285	
	Purpose of Disbursement travel expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE

B.	Full Name (Last, First, Middle Initial) Marriott	Transaction ID: 10215.E6096 Date of Disbursement 02 / 07 / 2011
	Mailing Address multiple locations	Amount of Each Disbursement this Period 380.71
	City Washington State DC Zip Code 20002-	
	Purpose of Disbursement lodging Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: LODGING

C.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: 10215.E6097 Date of Disbursement 02 / 07 / 2011
	Mailing Address PO Box 1140	Amount of Each Disbursement this Period 49.23
	City Memphis State TN Zip Code 38101-1140	
	Purpose of Disbursement express mail delivery Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: EXPRESS MAIL DELIVERY

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Florida Business Information, Inc.  Mailing Address PO Box 193  City Bell State CA Zip Code 32619-0193  Purpose of Disbursement newspaper clipping service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6098 Date of Disbursement 02 / 07 / 2011	Amount of Each Disbursement this Period 125.00  <b>[MEMO ITEM]</b> MEMO: NEWSPAPER CLIPPING SERVICE
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address 131 North Court House Rd  City Arlington State VA Zip Code 22201-  Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6099 Date of Disbursement 02 / 07 / 2011	Amount of Each Disbursement this Period 60.07  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>C.</b>	Full Name (Last, First, Middle Initial) Heritage Foundation  Mailing Address 214 Massachusetts Ave NE  City Washington State DC Zip Code 20002-  Purpose of Disbursement campaign gifts (pocket Constitution) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6100 Date of Disbursement 02 / 07 / 2011	Amount of Each Disbursement this Period 728.00  <b>[MEMO ITEM]</b> MEMO: CAMPAIGN GIFTS (POCKET CONSTITUTION)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Sheraton BWI Hotel

Mailing Address 1100 Old Elkridge Landing Rd

City Linthicum Heights State MD Zip Code 21090-

Purpose of Disbursement  
lodging

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6101  
Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

156.38

[MEMO ITEM]  
MEMO: LODGING

B.

Full Name (Last, First, Middle Initial)  
Matchbox

Mailing Address 521 8th Street SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
campaign meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6102  
Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

208.00

[MEMO ITEM]  
MEMO: CAMPAIGN MEALS

C.

Full Name (Last, First, Middle Initial)  
Bistros Bis

Mailing Address 15 E Street, N.W.

City Washington State DC Zip Code 20001-

Purpose of Disbursement  
campaign meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6105  
Date of Disbursement

02 / 07 / 2011

Amount of Each Disbursement this Period

92.03

[MEMO ITEM]  
MEMO: CAMPAIGN MEALS

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 7 Park Center</p> <p>City Pittsburgh State PA Zip Code 15220-</p> <p>Purpose of Disbursement air travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6106 <b>Date of Disbursement</b> 02 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 575.60</p> <p><b>[MEMO ITEM]</b> MEMO: AIR TRAVEL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 1st St SE</p> <p>City Washington State DC Zip Code 20003-1801</p> <p>Purpose of Disbursement campaign meals/meetings (Aug-Dec)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6107 <b>Date of Disbursement</b> 02 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 1509.20</p> <p><b>[MEMO ITEM]</b> MEMO: CAMPAIGN MEALS/MEETINGS (AUG-DEC)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Yuma Solutions, Inc.</p> <p>Mailing Address 1922 Miccosukee Road</p> <p>City Tallahassee State FL Zip Code 32308-</p> <p>Purpose of Disbursement blackberry service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6109 <b>Date of Disbursement</b> 02 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 359.00</p> <p><b>[MEMO ITEM]</b> MEMO: BLACKBERRY SERVICE</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Taxicab	Transaction ID: 10215.E6111 Date of Disbursement 02 / 07 / 2011
	Mailing Address: Various locations	Amount of Each Disbursement this Period 10.00
	City: Washington State: DC Zip Code: 20002-	
	Purpose of Disbursement: taxi service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: TAXI SERVICE

B.	Full Name (Last, First, Middle Initial) Parking Lots VENDOR:	Transaction ID: 10215.E6112 Date of Disbursement 02 / 07 / 2011
	Mailing Address: (multiple locations)	Amount of Each Disbursement this Period 20.00
	City: Washington State: DC Zip Code: 20002-	
	Purpose of Disbursement: parking services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> MEMO: PARKING SERVICES

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: 10406.E6170 Date of Disbursement 03 / 04 / 2011
	Mailing Address: P. O. Box 360002	Amount of Each Disbursement this Period 9989.56
	City: Fort Lauderdale State: FL Zip Code: 33336-	
	Purpose of Disbursement: CREDIT CARD: SEE BELOW	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9989.56
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T Wireless  Mailing Address P. O. Box 8229  City Aurora State IL Zip Code 60572-  Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6171 Date of Disbursement 03 / 04 / 2011  Amount of Each Disbursement this Period 216.32  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>B.</b>	Full Name (Last, First, Middle Initial) Facebook Advertising  Mailing Address online vendor  City Washington State DC Zip Code 20036-  Purpose of Disbursement advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6172 Date of Disbursement 03 / 04 / 2011  Amount of Each Disbursement this Period 2504.41  <b>[MEMO ITEM]</b> MEMO: ADVERTISING
<b>C.</b>	Full Name (Last, First, Middle Initial) US Airways  Mailing Address 7 Park Center  City Pittsburgh State PA Zip Code 15220-  Purpose of Disbursement air travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6173 Date of Disbursement 03 / 04 / 2011  Amount of Each Disbursement this Period 480.90  <b>[MEMO ITEM]</b> MEMO: AIR TRAVEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Mortons of Arlington

Mailing Address 1750 Crystal Dr

City Arlington State VA Zip Code 22202-3401

Purpose of Disbursement  
meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6174  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

234.70
--------

[MEMO ITEM]  
MEMO: MEALS

B.

Full Name (Last, First, Middle Initial)  
FedEx

Mailing Address PO Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
express mail delivery

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6175  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

192.27
--------

[MEMO ITEM]  
MEMO: EXPRESS MAIL DELIVE-  
RY

C.

Full Name (Last, First, Middle Initial)  
Florida Business Information, Inc.

Mailing Address PO Box 193

City Bell State CA Zip Code 32619-0193

Purpose of Disbursement  
newspaper clipping service

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6176  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

125.00
--------

[MEMO ITEM]  
MEMO: NEWSPAPER CLIPPING  
SERVICE

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Chops City Grill

Mailing Address 837 5th Avenue South

City State Zip Code  
Naples FL 34102-

Purpose of Disbursement  
meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6178  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

310.20
--------

[MEMO ITEM]  
MEMO: MEALS

B.

Full Name (Last, First, Middle Initial)  
Hilton Hotels

Mailing Address 1751 Hotel Plaza Blvd

City State Zip Code  
Orlando FL 32830-

Purpose of Disbursement  
lodging

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6179  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

208.79
--------

[MEMO ITEM]  
MEMO: LODGING

C.

Full Name (Last, First, Middle Initial)  
Salesforce.com

Mailing Address Online Vendor

City State Zip Code  
San Francisco CA 94105-

Purpose of Disbursement  
Database Management Service

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6183  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

1490.63
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[MEMO ITEM]  
MEMO: DATABASE MANAGEMENT SERVICE

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Tortilla Coast  Mailing Address 400 1st Street, S.E.  City Washington State DC Zip Code 20016-  Purpose of Disbursement meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6184 Date of Disbursement 03 / 04 / 2011	Amount of Each Disbursement this Period 106.74  <b>[MEMO ITEM]</b> MEMO: MEALS
<b>B.</b>	Full Name (Last, First, Middle Initial) US House of Rep. Gift Shop  Mailing Address B-217 Longworth Bldg.  City Washington State DC Zip Code 20515-  Purpose of Disbursement campaign gifts Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6186 Date of Disbursement 03 / 04 / 2011	Amount of Each Disbursement this Period 73.20  <b>[MEMO ITEM]</b> MEMO: CAMPAIGN GIFTS
<b>C.</b>	Full Name (Last, First, Middle Initial) Parking Lots VENDOR:  Mailing Address (multiple locations)  City Washington State DC Zip Code 20002-  Purpose of Disbursement parking services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6190 Date of Disbursement 03 / 04 / 2011	Amount of Each Disbursement this Period 33.00  <b>[MEMO ITEM]</b> MEMO: PARKING SERVICES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Cactus Cantina Restaurant <hr/> Mailing Address 3300 Wisconsin Avenue Northwest <hr/> City Washington State DC Zip Code 20016- <hr/> Purpose of Disbursement campaign meal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6192 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 253.13 <hr/> <b>[MEMO ITEM]</b> MEMO: CAMPAIGN MEAL
B.	Full Name (Last, First, Middle Initial) Budget Rent-a-car <hr/> Mailing Address multiple locations <hr/> City Washington State DC Zip Code 20002- <hr/> Purpose of Disbursement travel expense - rental car Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6193 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 245.53 <hr/> <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE - RENTAL CAR
C.	Full Name (Last, First, Middle Initial) Sonoma Restaurant <hr/> Mailing Address 223 Pennsylvania Ave SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement fundraising catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6194 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1995.00 <hr/> <b>[MEMO ITEM]</b> MEMO: FUNDRAISING CATERING

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: 10406.E6195 Date of Disbursement 03 / 04 / 2011
	Mailing Address P.O. Box 4607	Amount of Each Disbursement this Period 644.50
	City Houston State TX Zip Code 77210-4607	
	Purpose of Disbursement air travel	[MEMO ITEM] MEMO: AIR TRAVEL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: 10406.E6196 Date of Disbursement 03 / 04 / 2011
	Mailing Address 300 1st St SE	Amount of Each Disbursement this Period 528.01
	City Washington State DC Zip Code 20003-1801	
	Purpose of Disbursement campaign meals	[MEMO ITEM] MEMO: CAMPAIGN MEALS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Ritz Carlton	Transaction ID: 10406.E6198 Date of Disbursement 03 / 04 / 2011
	Mailing Address 1150 22nd Street, N.W.	Amount of Each Disbursement this Period 95.07
	City Washington State DC Zip Code 20037-	
	Purpose of Disbursement meals	[MEMO ITEM] MEMO: MEALS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b> Full Name (Last, First, Middle Initial) Arent Fox LLP <hr/> Mailing Address 1050 Connecticut Ave NW <hr/> City Washington State DC Zip Code 20036-5308 <hr/> Purpose of Disbursement FEC Campaign Reporting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6010 Date of Disbursement 01 / 05 / 2011
	Amount of Each Disbursement this Period 3117.34
	Category/ Type FEC CAMPAIGN REPORTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Arent Fox LLP <hr/> Mailing Address 1050 Connecticut Ave NW <hr/> City Washington State DC Zip Code 20036-5308 <hr/> Purpose of Disbursement FEC Campaign Reporting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6076 Date of Disbursement 02 / 07 / 2011
	Amount of Each Disbursement this Period 3267.36
	Category/ Type FEC CAMPAIGN REPORTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Arent Fox LLP <hr/> Mailing Address 1050 Connecticut Ave NW <hr/> City Washington State DC Zip Code 20036-5308 <hr/> Purpose of Disbursement FEC Campaign Reporting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10310.E6158 Date of Disbursement 03 / 04 / 2011
	Amount of Each Disbursement this Period 2797.07
	Category/ Type FEC CAMPAIGN REPORTING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

9181.77

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T- Cingular Wireless Mailing Address PO Box 31488 City Tampa State FL Zip Code 33631-3488 Purpose of Disbursement telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6073 Date of Disbursement 01 / 26 / 2011 Amount of Each Disbursement this Period 453.46 TELEPHONE SERVICE
	Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) AT&T- Cingular Wireless Mailing Address PO Box 31488 City Tampa State FL Zip Code 33631-3488 Purpose of Disbursement telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10310.E6155 Date of Disbursement 02 / 26 / 2011 Amount of Each Disbursement this Period 359.56 TELEPHONE SERVICE
	Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) AT&T- Cingular Wireless Mailing Address PO Box 31488 City Tampa State FL Zip Code 33631-3488 Purpose of Disbursement telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6243 Date of Disbursement 03 / 28 / 2011 Amount of Each Disbursement this Period 349.44 TELEPHONE SERVICE
	Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1162.46

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b> Full Name (Last, First, Middle Initial) Auto Owners Inc Mailing Address Olin Hill & Associates Inc 2804 Del Prado Blvd S Suite 107 City Cape Coral State FL Zip Code 33904-7282 Purpose of Disbursement campaign car insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10131.E6012 <b>Date of Disbursement</b> <input type="text"/> <sup>M</sup> <input type="text"/> <sup>M</sup> / <input type="text"/> <sup>D</sup> <input type="text"/> <sup>D</sup> / <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> 01 / 05 / 2011
	Amount of Each Disbursement this Period <input type="text"/> 205.56
	Category/ Type <input type="text"/>
	<b>CAMPAIGN CAR INSURANCE</b>

<b>B.</b> Full Name (Last, First, Middle Initial) Auto Owners Inc Mailing Address Olin Hill & Associates Inc 2804 Del Prado Blvd S Suite 107 City Cape Coral State FL Zip Code 33904-7282 Purpose of Disbursement campaign car insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10310.E6161 <b>Date of Disbursement</b> <input type="text"/> <sup>M</sup> <input type="text"/> <sup>M</sup> / <input type="text"/> <sup>D</sup> <input type="text"/> <sup>D</sup> / <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> 03 / 04 / 2011
	Amount of Each Disbursement this Period <input type="text"/> 2288.76
	Category/ Type <input type="text"/>
	<b>CAMPAIGN CAR INSURANCE</b>

<b>C.</b> Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10131.E6014 <b>Date of Disbursement</b> <input type="text"/> <sup>M</sup> <input type="text"/> <sup>M</sup> / <input type="text"/> <sup>D</sup> <input type="text"/> <sup>D</sup> / <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> <input type="text"/> <sup>Y</sup> 01 / 05 / 2011
	Amount of Each Disbursement this Period <input type="text"/> 2070.08
	Category/ Type <input type="text"/>
	<b>CREDIT CARD: SEE BELOW</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text"/> 4564.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement card membership fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6015 Date of Disbursement 01 / 05 / 2011 Amount of Each Disbursement this Period 50.00 [MEMO ITEM] MEMO: CARD MEMBERSHIP FEES
B.	Full Name (Last, First, Middle Initial) Hilton Hotels Mailing Address 1751 Hotel Plaza Blvd City Orlando State FL Zip Code 32830- Purpose of Disbursement meeting space Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6020 Date of Disbursement 01 / 05 / 2011 Amount of Each Disbursement this Period 31.15 [MEMO ITEM] MEMO: MEETING SPACE
C.	Full Name (Last, First, Middle Initial) 7-Eleven Mailing Address 83 E Colonial Dr City Orlando State FL Zip Code 32801-1238 Purpose of Disbursement fuel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6023 Date of Disbursement 01 / 05 / 2011 Amount of Each Disbursement this Period 23.16 [MEMO ITEM] MEMO: FUEL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 7 Park Center</p> <p>City Pittsburgh State PA Zip Code 15220-</p> <p>Purpose of Disbursement inflight meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10131.E6025</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7.00"/></p> <p><b>[MEMO ITEM]</b> MEMO: INFLIGHT MEAL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Parking Lots VENDOR:</p> <p>Mailing Address (multiple locations)</p> <p>City Washington State DC Zip Code 20002-</p> <p>Purpose of Disbursement parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10131.E6026</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="19.00"/></p> <p><b>[MEMO ITEM]</b> MEMO: PARKING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bistros Bis</p> <p>Mailing Address 15 E Street, N.W.</p> <p>City Washington State DC Zip Code 20001-</p> <p>Purpose of Disbursement meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10131.E6027</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="47.70"/></p> <p><b>[MEMO ITEM]</b> MEMO: MEALS</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Amtrak Mailing Address 60 Massachusetts Ave NE City Washington State DC Zip Code 20002-4285 Purpose of Disbursement travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6029 Date of Disbursement 01 / 05 / 2011	Amount of Each Disbursement this Period 444.75 [MEMO ITEM] MEMO: TRAVEL EXPENSE
<b>B.</b>	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 1st Street, S.E. City Washington State DC Zip Code 20016- Purpose of Disbursement meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6030 Date of Disbursement 01 / 05 / 2011	Amount of Each Disbursement this Period 80.76 [MEMO ITEM] MEMO: MEALS
<b>C.</b>	Full Name (Last, First, Middle Initial) Taxicab Mailing Address Various locations City Washington State DC Zip Code 20002- Purpose of Disbursement taxi service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6031 Date of Disbursement 01 / 05 / 2011	Amount of Each Disbursement this Period 12.20 [MEMO ITEM] MEMO: TAXI SERVICE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T Wireless  Mailing Address P. O. Box 8229  City Aurora State IL Zip Code 60572-  Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6033 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 154.21  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>B.</b>	Full Name (Last, First, Middle Initial) CenturyLink  Mailing Address PO Box 96064  City Charlotte State NC Zip Code 28296-0064  Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6034 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 150.02  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>C.</b>	Full Name (Last, First, Middle Initial) Bonita Springs Self Storage  Mailing Address 8953 Terrene Court  City Bonita Springs State FL Zip Code 34135-  Purpose of Disbursement storage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6035 Date of Disbursement 01 / 05 / 2011  Amount of Each Disbursement this Period 174.13  <b>[MEMO ITEM]</b> MEMO: STORAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Southwest Florida International Airport <hr/> Mailing Address 11000 Terminal Access Rd Ste 8671 <hr/> City Fort Myers State FL Zip Code 33913-8213 <hr/> Purpose of Disbursement parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10131.E6038 Date of Disbursement 01 / 05 / 2011	Amount of Each Disbursement this Period 4.00  <b>[MEMO ITEM]</b> MEMO: PARKING
<b>B.</b>	Full Name (Last, First, Middle Initial) Chase Card Services <hr/> Mailing Address PO Box 15153 <hr/> City Wilmington State DE Zip Code 19886-5153 <hr/> Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6115 Date of Disbursement 02 / 07 / 2011	Amount of Each Disbursement this Period 10654.53  CREDIT CARD: SEE BELOW
<b>C.</b>	Full Name (Last, First, Middle Initial) The Congressional Institute <hr/> Mailing Address 1700 Diagonal Road. #730 <hr/> City Alexandria State VA Zip Code 22314- <hr/> Purpose of Disbursement 2011 GOP Member Retreat Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6116 Date of Disbursement 02 / 07 / 2011	Amount of Each Disbursement this Period 837.00  <b>[MEMO ITEM]</b> MEMO: 2011 GOP MEMBER RET-REAT

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

10654.53

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) US Airways  Mailing Address 7 Park Center  City Pittsburgh State PA Zip Code 15220-  Purpose of Disbursement air travel and meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6122 Date of Disbursement 02 / 07 / 2011  Amount of Each Disbursement this Period 239.35  <b>[MEMO ITEM]</b> MEMO: AIR TRAVEL AND MEALS	
<b>B.</b>	Full Name (Last, First, Middle Initial) 7-Eleven  Mailing Address 83 E Colonial Dr  City Orlando State FL Zip Code 32801-1238  Purpose of Disbursement campaign meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6123 Date of Disbursement 02 / 07 / 2011  Amount of Each Disbursement this Period 7.92  <b>[MEMO ITEM]</b> MEMO: CAMPAIGN MEALS	
<b>C.</b>	Full Name (Last, First, Middle Initial) Bistros Bis  Mailing Address 15 E Street, N.W.  City Washington State DC Zip Code 20001-  Purpose of Disbursement campaign meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6125 Date of Disbursement 02 / 07 / 2011  Amount of Each Disbursement this Period 90.93  <b>[MEMO ITEM]</b> MEMO: CAMPAIGN MEALS	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T Wireless  Mailing Address P. O. Box 8229  City Aurora State IL Zip Code 60572-  Purpose of Disbursement telephone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6126 Date of Disbursement 02 / 07 / 2011  Amount of Each Disbursement this Period 154.21  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>B.</b>	Full Name (Last, First, Middle Initial) La Lomita Dos  Mailing Address 308 Pennsylvania Avenue Southeast  City Washington State PA Zip Code 20003-  Purpose of Disbursement campaign meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6127 Date of Disbursement 02 / 07 / 2011  Amount of Each Disbursement this Period 136.00  <b>[MEMO ITEM]</b> MEMO: CAMPAIGN MEALS
<b>C.</b>	Full Name (Last, First, Middle Initial) Sheraton BWI Hotel  Mailing Address 1100 Old Elkridge Landing Rd  City Linthicum Heights State MD Zip Code 21090-  Purpose of Disbursement lodging Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6129 Date of Disbursement 02 / 07 / 2011  Amount of Each Disbursement this Period 206.65  <b>[MEMO ITEM]</b> MEMO: LODGING

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Parking Lots VENDOR: <hr/> Mailing Address (multiple locations) <hr/> City Washington State DC Zip Code 20002- Purpose of Disbursement parking services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6130 Date of Disbursement 02 / 07 / 2011 <hr/> Amount of Each Disbursement this Period 40.00 <hr/> <b>[MEMO ITEM]</b> MEMO: PARKING SERVICES
<b>B.</b>	Full Name (Last, First, Middle Initial) American Airlines <hr/> Mailing Address 4333 Amon Carter Blvd <hr/> City Fort Worth State TX Zip Code 76155- Purpose of Disbursement air travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6131 Date of Disbursement 02 / 07 / 2011 <hr/> Amount of Each Disbursement this Period 216.80 <hr/> <b>[MEMO ITEM]</b> MEMO: AIR TRAVEL
<b>C.</b>	Full Name (Last, First, Middle Initial) Bonita Springs Self Storage <hr/> Mailing Address 8953 Terrene Court <hr/> City Bonita Springs State FL Zip Code 34135- Purpose of Disbursement storage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6133 Date of Disbursement 02 / 07 / 2011 <hr/> Amount of Each Disbursement this Period 174.13 <hr/> <b>[MEMO ITEM]</b> MEMO: STORAGE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Southwest Florida International Airport

Mailing Address 11000 Terminal Access Rd Ste 8671

City State Zip Code  
Fort Myers FL 33913-8213

Purpose of Disbursement  
parking

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6136  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

48.00
-------

[MEMO ITEM]  
MEMO: PARKING

B.

Full Name (Last, First, Middle Initial)  
Gulf Harbour Golf & Country Club

Mailing Address 14500 Vista River Dr

City State Zip Code  
Fort Myers FL 33908-7911

Purpose of Disbursement  
Constituent Christmas Party

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6139  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

7219.20
---------

[MEMO ITEM]  
MEMO: CONSTITUENT CHRISTMAS PARTY

C.

Full Name (Last, First, Middle Initial)  
Marriott

Mailing Address multiple locations

City State Zip Code  
Washington DC 20002-

Purpose of Disbursement  
lodging

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6142  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

193.14
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[MEMO ITEM]  
MEMO: LODGING

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Amtrak  Mailing Address 60 Massachusetts Ave NE  City Washington State DC Zip Code 20002-4285  Purpose of Disbursement travel expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6143 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1	Amount of Each Disbursement this Period 378.00  <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
<b>B.</b>	Full Name (Last, First, Middle Initial) Taxicab  Mailing Address Various locations  City Washington State DC Zip Code 20002-  Purpose of Disbursement taxi services Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6144 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1	Amount of Each Disbursement this Period 24.80  <b>[MEMO ITEM]</b> MEMO: TAXI SERVICES
<b>C.</b>	Full Name (Last, First, Middle Initial) Del Friscos  Mailing Address 1221 Avenue of the Americas  City New York State NY Zip Code 10020-  Purpose of Disbursement campaign meals Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10215.E6146 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1	Amount of Each Disbursement this Period 301.88  <b>[MEMO ITEM]</b> MEMO: CAMPAIGN MEALS

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address PO Box 15153 City Wilmington State DE Zip Code 19886-5153 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6200 Date of Disbursement 03 / 04 / 2011 Amount of Each Disbursement this Period 8439.14 CREDIT CARD: SEE BELOW
<b>B.</b>	Full Name (Last, First, Middle Initial) Gavel Store Mailing Address 321 West 900 North Street City Springville State UT Zip Code 84663- Purpose of Disbursement campaign gifts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6201 Date of Disbursement 03 / 04 / 2011 Amount of Each Disbursement this Period 211.65 [MEMO ITEM] MEMO: CAMPAIGN GIFTS
<b>C.</b>	Full Name (Last, First, Middle Initial) USPS Mailing Address 1050 Connecticut Ave, NW City Washington State DC Zip Code 20036- Purpose of Disbursement shipping services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6206 Date of Disbursement 03 / 04 / 2011 Amount of Each Disbursement this Period 176.99 [MEMO ITEM] MEMO: SHIPPING SERVICES

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

8439.14

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) La Lomita Dos</p> <p>Mailing Address 308 Pennsylvania Avenue Southeast</p> <p>City Washington State PA Zip Code 20003-</p> <p>Purpose of Disbursement meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10406.E6209</p> <p>Date of Disbursement 03 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 179.25</p> <p><b>[MEMO ITEM]</b> MEMO: MEALS</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CenturyLink</p> <p>Mailing Address PO Box 96064</p> <p>City Charlotte State NC Zip Code 28296-0064</p> <p>Purpose of Disbursement telephone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10406.E6210</p> <p>Date of Disbursement 03 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 141.66</p> <p><b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Taxicab</p> <p>Mailing Address Various locations</p> <p>City Washington State DC Zip Code 20002-</p> <p>Purpose of Disbursement taxi services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10406.E6211</p> <p>Date of Disbursement 03 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 42.75</p> <p><b>[MEMO ITEM]</b> MEMO: TAXI SERVICES</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b> Full Name (Last, First, Middle Initial) US Airways Mailing Address 7 Park Center City Pittsburgh State PA Zip Code 15220- Purpose of Disbursement air travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6212 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 716.30
	[MEMO ITEM] MEMO: AIR TRAVEL
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Parking Lots VENDOR: Mailing Address (multiple locations) City Washington State DC Zip Code 20002- Purpose of Disbursement parking services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6213 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 62.00
	[MEMO ITEM] MEMO: PARKING SERVICES
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) AAA Washington Sedans Mailing Address 4817 Autumn Glory Way City Chantilly State VA Zip Code 20151- Purpose of Disbursement travel - car service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6214 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 253.00
	[MEMO ITEM] MEMO: TRAVEL - CAR SERVICE
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 106

17    18    19a    19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

**A.**

Full Name (Last, First, Middle Initial)  
Hampton Inn

Transaction ID: 10406.E6216  
Date of Disbursement

Mailing Address      Multiple Locations

/   /

City      State      Zip Code  
Washington      DC      20002-

Amount of Each Disbursement this Period

Purpose of Disbursement  
lodging

Category/  
Type

Candidate Name

**[MEMO ITEM]**  
MEMO: LODGING

Office Sought:      Disbursement For:  
 House       Primary       General  
 Senate       Other (specify) ▼  
 President  
State:      District:

**B.**

Full Name (Last, First, Middle Initial)  
Tortilla Coast

Transaction ID: 10406.E6219  
Date of Disbursement

Mailing Address      400 1st Street, S.E.

/   /

City      State      Zip Code  
Washington      DC      20016-

Amount of Each Disbursement this Period

Purpose of Disbursement  
meals

Category/  
Type

Candidate Name

**[MEMO ITEM]**  
MEMO: MEALS

Office Sought:      Disbursement For:  
 House       Primary       General  
 Senate       Other (specify) ▼  
 President  
State:      District:

**C.**

Full Name (Last, First, Middle Initial)  
Pinchers Crab Shack

Transaction ID: 10406.E6222  
Date of Disbursement

Mailing Address      13021 N. Cleveland Ave.

/   /

City      State      Zip Code  
North Fort Myers      FL      33903-

Amount of Each Disbursement this Period

Purpose of Disbursement  
meals

Category/  
Type

Candidate Name

**[MEMO ITEM]**  
MEMO: MEALS

Office Sought:      Disbursement For:  
 House       Primary       General  
 Senate       Other (specify) ▼  
 President  
State:      District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T Wireless <hr/> Mailing Address P. O. Box 8229 <hr/> City Aurora State IL Zip Code 60572- <hr/> Purpose of Disbursement telephone service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6224 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1	Amount of Each Disbursement this Period 154.83  <b>[MEMO ITEM]</b> MEMO: TELEPHONE SERVICE
<b>B.</b>	Full Name (Last, First, Middle Initial) Budget Rent-a-car <hr/> Mailing Address multiple locations <hr/> City Washington State DC Zip Code 20002- <hr/> Purpose of Disbursement travel expense - rental car Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6227 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1	Amount of Each Disbursement this Period 58.54  <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE - RENTAL CAR
<b>C.</b>	Full Name (Last, First, Middle Initial) Southwest Florida International Airport <hr/> Mailing Address 11000 Terminal Access Rd Ste 8671 <hr/> City Fort Myers State FL Zip Code 33913-8213 <hr/> Purpose of Disbursement parking Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10406.E6231 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1	Amount of Each Disbursement this Period 247.00  <b>[MEMO ITEM]</b> MEMO: PARKING

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ritz Carlton</p> <p>Mailing Address 1150 22nd Street, N.W.</p> <p>City Washington State DC Zip Code 20037-</p> <p>Purpose of Disbursement event catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10406.E6235</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="4200.00"/></p> <p><b>[MEMO ITEM]</b> MEMO: EVENT CATERING</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Publix</p> <p>Mailing Address Colonial Crossings 4600 Summerlin Rd</p> <p>City Fort Myers State FL Zip Code 33919-</p> <p>Purpose of Disbursement fundraising event supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10406.E6236</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="114.98"/></p> <p><b>[MEMO ITEM]</b> MEMO: FUNDRAISING EVENT SUPPLIES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Marriott</p> <p>Mailing Address multiple locations</p> <p>City Washington State DC Zip Code 20002-</p> <p>Purpose of Disbursement lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10406.E6238</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="223.82"/></p> <p><b>[MEMO ITEM]</b> MEMO: LODGING</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
7-Eleven

Mailing Address 83 E Colonial Dr

City Orlando State FL Zip Code 32801-1238

Purpose of Disbursement  
fuel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6239  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

19.59
-------

[MEMO ITEM]  
MEMO: FUEL

B.

Full Name (Last, First, Middle Initial)  
FedEx

Mailing Address PO Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
shipping services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10406.E6241  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

Amount of Each Disbursement this Period

10.50
-------

[MEMO ITEM]  
MEMO: SHIPPING SERVICES

C.

Full Name (Last, First, Middle Initial)  
Edonation 1 Account

Mailing Address 118 N Saint Asaph St

City Alexandria State VA Zip Code 22314-3110

Purpose of Disbursement  
fundraising fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10215.E6080  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	1

Amount of Each Disbursement this Period

402.55
--------

FUNDRAISING FEE

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

402.55
--------

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

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Edonation 1 Account	Transaction ID: 10310.E6153 Date of Disbursement 02 / 28 / 2011
	Mailing Address 118 N Saint Asaph St	Amount of Each Disbursement this Period 228.76
	City Alexandria State VA Zip Code 22314-3110	
	Purpose of Disbursement fundraising fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FUNDRAISING FEE

B.	Full Name (Last, First, Middle Initial) Edonation 1 Account	Transaction ID: 10406.E6242 Date of Disbursement 03 / 31 / 2011
	Mailing Address 118 N Saint Asaph St	Amount of Each Disbursement this Period 615.68
	City Alexandria State VA Zip Code 22314-3110	
	Purpose of Disbursement fundraising fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FUNDRAISING FEE

C.	Full Name (Last, First, Middle Initial) Ford Credit	Transaction ID: 10131.E6013 Date of Disbursement 01 / 05 / 2011
	Mailing Address PO Box 105697	Amount of Each Disbursement this Period 635.71
	City Atlanta State GA Zip Code 30348-5697	
	Purpose of Disbursement campaign car Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CAMPAIGN CAR

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1480.15
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Ford Credit	Transaction ID: 10215.E6079 Date of Disbursement 02 / 07 / 2011
	Mailing Address PO Box 105697	Amount of Each Disbursement this Period 635.71
	City Atlanta State GA Zip Code 30348-5697	
	Purpose of Disbursement campaign car	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CAMPAIGN CAR
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Ford Credit	Transaction ID: 10310.E6162 Date of Disbursement 03 / 04 / 2011
	Mailing Address PO Box 105697	Amount of Each Disbursement this Period 635.71
	City Atlanta State GA Zip Code 30348-5697	
	Purpose of Disbursement campaign car	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	CAMPAIGN CAR
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Jivaldi LLC	Transaction ID: 10131.E6011 Date of Disbursement 01 / 05 / 2011
	Mailing Address 707 MOUNT Errigal PI	Amount of Each Disbursement this Period 3800.00
	City Lincoln State CA Zip Code 95648-	
	Purpose of Disbursement website service fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	WEBSITE SERVICE FEE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5071.42
<b>TOTAL</b> 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Jivaldi LLC

Transaction ID: 10215.E6078  
Date of Disbursement

Mailing Address 707 MOUNT ERRIGAL PI

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

City Lincoln State CA Zip Code 95648-

Amount of Each Disbursement this Period

1975.00
---------

Purpose of Disbursement  
website service fee

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

WEBSITE SERVICE FEE

State: District:

B.

Full Name (Last, First, Middle Initial)  
Jivaldi LLC

Transaction ID: 10310.E6160  
Date of Disbursement

Mailing Address 707 MOUNT ERRIGAL PI

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	1

City Lincoln State CA Zip Code 95648-

Amount of Each Disbursement this Period

10368.75
----------

Purpose of Disbursement  
website service fee and design

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

WEBSITE SERVICE FEE AND DESIGN

State: District:

C.

Full Name (Last, First, Middle Initial)  
SCM Associates, Inc.

Transaction ID: 10131.E6008  
Date of Disbursement

Mailing Address 1283 MAIN STREET  
PO Box 254

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

City Dublin State NH Zip Code 03444-

Amount of Each Disbursement this Period

3910.60
---------

Purpose of Disbursement  
direct mail and telemarketing

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

DIRECT MAIL AND TELEMARKETING

State: District:

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

16254.35
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TOTAL This Period (last page this line number only) .....

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**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 100 / 106

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) SCM Associates, Inc.</p> <p>Mailing Address 1283 Main Street PO Box 254</p> <p>City Dublin State NH Zip Code 03444-</p> <p>Purpose of Disbursement direct mail and telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6074</p> <p>Date of Disbursement MM / DD / YYYY 02 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 5626.55</p> <p><b>DIRECT MAIL AND TELEMARKE- NG</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) SCM Associates, Inc.</p> <p>Mailing Address 1283 Main Street PO Box 254</p> <p>City Dublin State NH Zip Code 03444-</p> <p>Purpose of Disbursement direct mail and telemarketing servi</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6081</p> <p>Date of Disbursement MM / DD / YYYY 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 17816.40</p> <p><b>DIRECT MAIL AND TELEMARKE- TING SERVI</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SCM Associates, Inc.</p> <p>Mailing Address 1283 Main Street PO Box 254</p> <p>City Dublin State NH Zip Code 03444-</p> <p>Purpose of Disbursement direct mail and telemarketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10310.E6156</p> <p>Date of Disbursement MM / DD / YYYY 03 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 14374.77</p> <p><b>DIRECT MAIL AND TELEMARKE- TING</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**37817.72**

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) Southwest Direct</p> <p>Mailing Address 2129 Andrea Ln</p> <p>City Fort Myers State FL Zip Code 33912-1903</p> <p>Purpose of Disbursement direct mail services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10131.E6009 <b>Date of Disbursement</b> 01 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 1532.81</p> <p><b>DIRECT MAIL SERVICES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Southwest Direct</p> <p>Mailing Address 2129 Andrea Ln</p> <p>City Fort Myers State FL Zip Code 33912-1903</p> <p>Purpose of Disbursement direct mail services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10131.E6066 <b>Date of Disbursement</b> 01 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 508.81</p> <p><b>DIRECT MAIL SERVICES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Southwest Direct</p> <p>Mailing Address 2129 Andrea Ln</p> <p>City Fort Myers State FL Zip Code 33912-1903</p> <p>Purpose of Disbursement direct mail services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6068 <b>Date of Disbursement</b> 01 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 642.40</p> <p><b>DIRECT MAIL SERVICES</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2684.02

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) Southwest Direct</p> <p>Mailing Address 2129 Andrea Ln</p> <p>City Fort Myers State FL Zip Code 33912-1903</p> <p>Purpose of Disbursement direct mail services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6075</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="956.39"/></p> <p><b>DIRECT MAIL SERVICES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Southwest Direct</p> <p>Mailing Address 2129 Andrea Ln</p> <p>City Fort Myers State FL Zip Code 33912-1903</p> <p>Purpose of Disbursement direct mail services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10310.E6157</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1713.58"/></p> <p><b>DIRECT MAIL SERVICES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 1050 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20036-</p> <p>Purpose of Disbursement stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6082</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="132.00"/></p> <p><b>STAMPS</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address 1050 Connecticut Ave, NW

City Washington State DC Zip Code 20036-

Purpose of Disbursement stamps

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10406.E6167  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	1

Amount of Each Disbursement this Period

88.00
-------

STAMPS

B.

Full Name (Last, First, Middle Initial)  
Arthur J. Finkelstein & Assoc.

Mailing Address 16 N Astor St

City Irvington State NY Zip Code 10533-1522

Purpose of Disbursement political consulting and expenses

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10131.E6007  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	1	1

Amount of Each Disbursement this Period

3833.70
---------

POLITICAL CONSULTING AND EXPENSES

C.

Full Name (Last, First, Middle Initial)  
Arthur J. Finkelstein & Assoc.

Mailing Address 16 N Astor St

City Irvington State NY Zip Code 10533-1522

Purpose of Disbursement political consulting and expenses

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 10215.E6072  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	1	1

Amount of Each Disbursement this Period

4069.23
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POLITICAL CONSULTING AND EXPENSES

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

7990.93
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TOTAL This Period (last page this line number only) .....

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# 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

<p><b>A.</b> Full Name (Last, First, Middle Initial) Arthur J. Finkelstein &amp; Assoc.</p> <p>Mailing Address 16 N Astor St</p> <p>City Irvington State NY Zip Code 10533-1522</p> <p>Purpose of Disbursement political consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10310.E6154</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3500.00"/></p> <p>POLITICAL CONSULTING</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) F. Edwin Black IV</p> <p>Mailing Address 214 N Blue Ridge Pkwy</p> <p>City Cedar Park State TX Zip Code 78613-3059</p> <p>Purpose of Disbursement Audio/Visual work</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10310.E6163</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1848.75"/></p> <p>AUDIO/VISUAL WORK</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Janet Bain Company</p> <p>Mailing Address 1333 New Hampshire Ave NW Ste 424 Suite 424</p> <p>City Washington State DC Zip Code 20036-1532</p> <p>Purpose of Disbursement fundraising consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10215.E6077</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="362.80"/></p> <p>FUNDRAISING CONSULTING</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**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 105 / 106

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
White House Writers Group, Inc

Transaction ID: 10310.E6152

Date of Disbursement

Mailing Address PO Box 62289

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	1

City Baltimore State MD Zip Code 21264-

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement  
Speechwriting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

SPEECHWRITING

State: District:

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

10000.00

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

170723.78

**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 106 / 106

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

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NAME OF COMMITTEE (In Full)  
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)  
Bonita Spring Little League

Transaction ID: 10312.E6164

Date of Disbursement

Mailing Address 11791 Imperial Pines Way

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	1

City State Zip Code  
Bonita Springs FL 34135-

Amount of Each Disbursement this Period

1200.00
---------

Purpose of Disbursement  
TEAM SPONSORSHIP

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1200.00
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**TOTAL** This Period (last page this line number only) ..... ►

1200.00
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