

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Connie Mack

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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)).....	72920.49	336582.66
(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)).....	72920.49	336582.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	87711.34	374385.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	370.00	604.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	87341.34	373781.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	526073.90	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Friends of Connie Mack

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	39325.00	242424.50
(i) Itemized (use Schedule A).....	11890.49	42903.16
(ii) Unitemized.....	51215.49	285327.66
(iii) TOTAL of contributions from individuals..... ▶	0.00	500.00
(b) Political Party Committees.....	21705.00	50755.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	72920.49	336582.66
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	370.00	604.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	73290.49	337186.66

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	87711.34	374385.39
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.....	1500.00	15500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	89211.34	389885.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	541994.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	73290.49
25. SUBTOTAL (add Line 23 and Line 24).....	615285.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	89211.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	526073.90

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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) Daniel Adams		Date of Receipt
	Mailing Address 2104 West First Street Suite 2304		<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 08 / 10 / 2009
	City	State	Zip Code
	Fort Myers	FL	33901
	FEC ID number of contributing federal political committee. C		Transaction ID: 91005.C20812
Name of Employer Self Employed		Occupation investor	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 200.00	Receipt

B.	Full Name (Last, First, Middle Initial) James Arnold		Date of Receipt
	Mailing Address 14101 River Rd		<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 08 / 11 / 2009
	City	State	Zip Code
	Fort Myers	FL	33905-7451
	FEC ID number of contributing federal political committee. C		Transaction ID: 91005.C20850
Name of Employer Consultant		Occupation consultant	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	Receipt

C.	Full Name (Last, First, Middle Initial) Robert Aune		Date of Receipt
	Mailing Address 1 Michael Rd		<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 07 / 21 / 2009
	City	State	Zip Code
	Stuart	FL	34996-6613
	FEC ID number of contributing federal political committee. C		Transaction ID: 91005.C20790
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
TOTAL 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 6 / 74
(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>A. Full Name (Last, First, Middle Initial) George G. Beasley</p> <p>Mailing Address 3033 Riviera Drive Suite 200</p> <p>City State Zip Code Naples FL 34103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Beasley Broadcast Group, Inc.</p> <p>Occupation CEO</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 17 / 2009</p> <p>Transaction ID: 91005.C20962</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Samira Beckwith</p> <p>Mailing Address 17080 Harbour Point, #1212</p> <p>City State Zip Code Fort Myers FL 33908</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hope Hospice Care</p> <p>Occupation President/ CEO</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 08 / 10 / 2009</p> <p>Transaction ID: 91005.C20820</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Jean Black</p> <p>Mailing Address 4067 W Gulf Dr</p> <p>City State Zip Code Sanibel FL 33957-5209</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired</p> <p>Occupation retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt 08 / 10 / 2009</p> <p>Transaction ID: 91005.C20822</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	1700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 74
(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>A. Full Name (Last, First, Middle Initial) Ruel Burns</p> <p>Mailing Address 3655 Woodstork Court</p> <p>City State Zip Code Fort Myers FL 33908-4122</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2009</p> <p>Transaction ID: 91005.C20981</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Arthur Choate</p> <p>Mailing Address 1390 S. Dixie Hwy., #2221</p> <p>City State Zip Code Miami FL 33146</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Artmarina, Inc. boat charters</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2009</p> <p>Transaction ID: 91005.C20978</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Jeffrey M. Cohen</p> <p>Mailing Address 13280 Corbel Circle, #1922</p> <p>City State Zip Code Fort Myers FL 33907</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation DirectImpact executive v.p.</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2009</p> <p>Transaction ID: 90806.C20776</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	1350.00
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 8 / 74
	<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

A.	Full Name (Last, First, Middle Initial) Gregory Coleman	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 3026 Sutton Woods Dr	Transaction ID: 91007.C21112
	City State Zip Code Plant City FL 33566-9606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Gregco Recycling Inc president	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Dan Corrigan	Date of Receipt MM / DD / YYYY 07 / 21 / 2009
	Mailing Address P. O. Box 690068	Transaction ID: 91005.C20791
	City State Zip Code Vero Beach FL 32969	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Self Employed realtor	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Joe Cox	Date of Receipt MM / DD / YYYY 08 / 09 / 2009
	Mailing Address 1185 Immokalee Road Suite 110	Transaction ID: 91005.C20805
	City State Zip Code Naples FL 34110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Cox and Nici attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 / 74
(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)
Andrew Craig
 Mailing Address 809 Wyndemere Way
 City State Zip Code
 Naples FL 34105-7167
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 retired retired
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 9
Transaction ID: 91005.C21017
 Amount of Each Receipt this Period
200.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Amelia Davies
 Mailing Address 2851 Old Burnt Store Rd N
 City State Zip Code
 Cape Coral FL 33993-8055
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Wilbur Smith Associates project manager
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 9
Transaction ID: 91005.C20826
 Amount of Each Receipt this Period
200.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Abigail Dosoretz
 Mailing Address 13225 Ponderosa Way
 City State Zip Code
 Fort Myers FL 33907-7851
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Student student
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 9
Transaction ID: 91005.C20809
 Amount of Each Receipt this Period
500.00
 Receipt

SUBTOTAL of Receipts This Page (optional) 900.00

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 / 74
(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 Doyle

Mailing Address 1243 Eagles Flight Way

City State Zip Code
North Port FL 34287-4407

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

Name of Employer Occupation
retired retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2009

Transaction ID: 91005.C20946

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 2 Laurelwood Ct

City State Zip Code
Rye NY 10580-1986

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

Name of Employer Occupation
Jefferies Group Inc finance

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 09 / 2009

Transaction ID: 91005.C20887

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 3301 Midship Dr

City State Zip Code
North Fort Myers FL 33903-6932

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 07 / 2009

Transaction ID: 91005.C20835

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 11 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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

A.	Full Name (Last, First, Middle Initial) Michael G. Fink		Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 2104 W 1st St Apt 2803		Transaction ID: 91005.C20857
	City Fort Myers	State FL	Zip Code 33901-3274
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
	Name of Employer Fink & Boyle, P.A.	Occupation attorney	Receipt
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00		

B.	Full Name (Last, First, Middle Initial) Walter Fischer		Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 980 Barcarmil Way		Transaction ID: 90710.C20735
	City Naples	State FL	Zip Code 34110-0903
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed	Occupation contractor	Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Walter Fluegel		Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 4715 SW 24th Pl		Transaction ID: 91005.C20839
	City Cape Coral	State FL	Zip Code 33914-6778
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 74
(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 Ford

Mailing Address 5585 Center St

City State Zip Code
Jupiter FL 33458-3941

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

Name of Employer Occupation
Palm Beach Cast Stone Inc president

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
07 / 01 / 2009

Transaction ID: 90710.C20734

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 542 11th Ave S

City State Zip Code
Naples FL 34102-7134

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

Name of Employer Occupation
retired retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 24 / 2009

Transaction ID: 91005.C21014

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 4901 SW 8th Ct

City State Zip Code
Cape Coral FL 33914-7359

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

Name of Employer Occupation
CSSI, LLC consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 10 / 2009

Transaction ID: 91005.C20815

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 74
	<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

A.	Full Name (Last, First, Middle Initial) Robert Furek	Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 1370 Cutler Ct.	Transaction ID: 90806.C20752
	City State Zip Code Marco Island FL 34145	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer retired Occupation retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) Katherine Gentile	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 1214 SE 21st St	Transaction ID: 91005.C20859
	City State Zip Code Cape Coral FL 33990-6603	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Information Requested Occupation Information Requested Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) George Gibbs	Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 5005 Yacht Club Rd	Transaction ID: 90806.C20766
	City State Zip Code Jacksonville FL 32210-8321	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer retired Occupation retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	▶	2800.00
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 / 74
(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)
Chris M. Giblin

Mailing Address 1304 Chancel Place

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
Ogilvy Government Relations senior vice president

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 25 / 2009

Transaction ID: 91005.C20872

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 5000 SW 83rd St

City State Zip Code
Miami FL 33143-8510

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

Name of Employer Occupation
Homemaker homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 91005.C20951

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 5541 Montilla Dr

City State Zip Code
Fort Myers FL 33919-3409

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 10 / 2009

Transaction ID: 91005.C20823

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 15 / 74
(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)
Harry Hammerly
 Mailing Address 4501 Gulf Shore Blvd N Apt 1404
 City Naples State FL Zip Code 34103-2764
 FEC ID number of contributing federal political committee. C
 Name of Employer retired Occupation retired
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt 09 / 21 / 2009
Transaction ID: 91005.C20994
 Amount of Each Receipt this Period 100.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Martin Harrity
 Mailing Address 1263 Isabel Dr
 City Sanibel State FL Zip Code 33957-3509
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Employed Occupation restauranteur
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt 08 / 16 / 2009
Transaction ID: 91005.C20880
 Amount of Each Receipt this Period 200.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Martin Harrity
 Mailing Address 1263 Isabel Dr
 City Sanibel State FL Zip Code 33957-3509
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Employed Occupation restauranteur
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2600.00

Date of Receipt 08 / 16 / 2009
Transaction ID: 91005.C20879
 Amount of Each Receipt this Period 2400.00
 Receipt

SUBTOTAL of Receipts This Page (optional) 2700.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 74
	<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) Charles Henderson	Date of Receipt MM / DD / YYYY 07 / 20 / 2009
	Mailing Address 231 Via Las Brisas	Transaction ID: 90806.C20762
	City State Zip Code Palm Beach FL 33480-3616	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer retired Occupation retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) James D. Henderson	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 3611 S.W. 63rd Lane	Transaction ID: 91005.C20942
	City State Zip Code Gainesville FL 32608	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer self-employed Occupation engineer Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Karen Hendry	Date of Receipt MM / DD / YYYY 08 / 21 / 2009
	Mailing Address 711 W Main St	Transaction ID: 91005.C20878
	City State Zip Code Immokalee FL 34142-3938	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Bruce Hendry Insurance Occupation insurance agent Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	450.00
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 17 / 74
(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)
Adam Herz

Mailing Address 355 E 72nd St Apt 7H

City State Zip Code
New York NY 10021-4687

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

Name of Employer Occupation
Hunter Advisors executive recruiter

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 09 / 2009

Transaction ID: 91005.C20886

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 677 Whitney Dr

City State Zip Code
Slidell LA 70461-4185

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

Name of Employer Occupation
Ingram McMath LLC partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2009

Transaction ID: 91005.C20796

Amount of Each Receipt this Period
2300.00

Receipt

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

Mailing Address 17320 Corkscrew Rd

City State Zip Code
Estero FL 33928-9417

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

Name of Employer Occupation
Old Corkscrew Golf Club manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2009

Transaction ID: 91005.C20851

Amount of Each Receipt this Period
200.00

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 18 / 74
(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>A. Full Name (Last, First, Middle Initial) Cindy Lignelli</p> <p>Mailing Address PO Box 296</p> <p>City State Zip Code Bokeelia FL 33922-0296</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9</p> <p>Transaction ID: 91007.C21111</p> <p>Amount of Each Receipt this Period </p> <p>Receipt</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) J. Robert Long</p> <p>Mailing Address 2443 SW Pine Island Road</p> <p>City State Zip Code Cape Coral FL 33991</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Marine Concepts owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 9</p> <p>Transaction ID: 91005.C20824</p> <p>Amount of Each Receipt this Period 50.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Barry Mannis</p> <p>Mailing Address 130 Dorchester Rd</p> <p>City State Zip Code Scarsdale NY 10583-6051</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Employed Private Investigator</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9</p> <p>Transaction ID: 91005.C21087</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 74
(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 Marinelli

Mailing Address 3290 Bermuda Isle Circel
#434

City State Zip Code
Naples FL 34109

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

Name of Employer Occupation
TIB Financial Potfolio Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	9

Transaction ID: 91005.C20821

Amount of Each Receipt this Period
75.00

Receipt

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

Mailing Address 8787 Bay Colony Dr., #503

City State Zip Code
Naples FL 34108

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

Name of Employer Occupation
retired retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: 91005.C20977

Amount of Each Receipt this Period
300.00

Receipt

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

Mailing Address 271 Indian Harbor Rd

City State Zip Code
Vero Beach FL 32963-3508

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

Name of Employer Occupation
retired retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	9

Transaction ID: 91005.C20913

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **675.00**

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 / 74
(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)
Joan McNulty
Mailing Address 2570 Del Lago Dr
City Fort Lauderdale State FL Zip Code 33316-2304
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9
Transaction ID: 91005.C21015
Amount of Each Receipt this Period
100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Alvin McQuinn
Mailing Address 1551 Gulf Shore Blvd S
City Naples State FL Zip Code 34102-7454
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9
Transaction ID: 91005.C21020
Amount of Each Receipt this Period
200.00
Receipt

C. Full Name (Last, First, Middle Initial)
Alvin McQuinn
Mailing Address 1551 Gulf Shore Blvd S
City Naples State FL Zip Code 34102-7454
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9
Transaction ID: 91005.C21019
Amount of Each Receipt this Period
2400.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 2700.00
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 / 74
(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)
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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91005.C21021

Amount of Each Receipt this Period
2400.00

Receipt

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

Mailing Address 720 Carpenter Rd

City State Zip Code
Alexandria VA 22314-6226

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Capitol Resources consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Transaction ID: 91005.C21083

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1203 Waverly Way

City State Zip Code
Longwood FL 32750-6255

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Business Owner owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91005.C21036

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) 3150.00

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 / 74
(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)
Dennis Moore

Mailing Address 574 Portsmouth Ct

City State Zip Code
Naples FL 34110-8686

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2009

Transaction ID: 90806.C20767

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 100 Worth Avenue #705

City State Zip Code
Palm Beach FL 33480

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

Name of Employer retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 14 / 2009

Transaction ID: 91005.C20937

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 14621 Highland Harbour Ct

City State Zip Code
Fort Myers FL 33908-4938

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

Name of Employer Lee Memorial Health Systems Occupation hospital administrator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 10 / 2009

Transaction ID: 91005.C20848

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 / 74
(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)
Sanders Orr

Mailing Address 4690 Tree Fern Dr

City State Zip Code
Delray Beach FL 33445-7064

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

Name of Employer Occupation
retired retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 20 / 2009

Transaction ID: 91005.C20979

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 1628 Colonial Hills Dr

City State Zip Code
Mc Lean VA 22102-2938

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

Name of Employer Occupation
DirectImpact govt. affairs

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2009

Transaction ID: 90806.C20777

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1239 Carlene Ave

City State Zip Code
Fort Myers FL 33901-8715

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: 91005.C21066

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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 / 74
(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)
Vincent Perri

Mailing Address 4681 Lone Pine CT

City State Zip Code
Fort Myers FL 33905-7225

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

Name of Employer VJP Salon Management, Inc. Occupation president

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	0	9

Transaction ID: 91005.C20849

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 6717 NW 48th Ln

City State Zip Code
Gainesville FL 32653-3953

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

Name of Employer Exactech Inc Occupation ceo

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	4	/	2	0	0	9

Transaction ID: 91005.C21079

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 224 Malibu Cove

City State Zip Code
Bonita Springs FL 34134-8536

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

Name of Employer retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: 91005.C20980

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 / 74
(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 J. Poelker

Mailing Address 16081 Amberwood Lake Ct Apt 2

City State Zip Code
Fort Myers FL 33908-3228

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Apple Transportation president

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 6 / 2 0 0 9

Transaction ID: 91005.C20958

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 163 E 81st St

City State Zip Code
New York NY 10028-1806

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SB Capital Group finance

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 7 / 2 0 0 9

Transaction ID: 91005.C20888

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address PO Box 566

City State Zip Code
Sanibel FL 33957-0566

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Employed real estate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 6 / 2 0 0 9

Transaction ID: 91005.C20904

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) 1350.00

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 / 74
(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)
Geoffrey Roepstorff

Mailing Address 1287 Isabel Drive

City Sanibel State FL Zip Code 33957

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

Name of Employer Edison National Bank Occupation banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2009
Transaction ID: 91005.C20802
 Amount of Each Receipt this Period 1000.00
 Receipt

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

Mailing Address 230 7th Ave N

City Naples State FL Zip Code 34102-5359

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

Name of Employer Wellington Management Holdings Occupation ceo

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3900.00

Date of Receipt 09 / 30 / 2009
Transaction ID: 91005.C21109
 Amount of Each Receipt this Period 1500.00
 Receipt

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

Mailing Address 4601 Gulf Shore Blvd N Apt. 12

City Naples State FL Zip Code 34103-2214

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

Name of Employer retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2600.00

Date of Receipt 08 / 12 / 2009
Transaction ID: 91005.C20856
 Amount of Each Receipt this Period 100.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 2600.00

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 / 74
(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)
Tracy Rudolph

Mailing Address 735 Macedonia Dr

City State Zip Code
Punta Gorda FL 33950-8021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
08 / 26 / 2009
Transaction ID: 91005.C20877
 Amount of Each Receipt this Period
500.00
 Receipt

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

Mailing Address 110 Rimini Way

City State Zip Code
North Venice FL 34275-6623

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
09 / 18 / 2009
Transaction ID: 91005.C20961
 Amount of Each Receipt this Period
400.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Mary Anne Sakson

Mailing Address 9330 Triana Ter Apt 4

City State Zip Code
Fort Myers FL 33912-0929

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
09 / 23 / 2009
Transaction ID: 91005.C21013
 Amount of Each Receipt this Period
100.00
 Receipt

SUBTOTAL of Receipts This Page (optional) 1000.00

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 / 74
(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>A. Full Name (Last, First, Middle Initial) Bruce A. Samson</p> <p>Mailing Address 3203 Bayshore Blvd., #602</p> <p>City Tampa State FL Zip Code 33629</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired Occupation retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2009</p> <p>Transaction ID: 91005.C21098</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Edwin Sandham</p> <p>Mailing Address 1964 SW Saint Andrews Dr</p> <p>City Palm City State FL Zip Code 34990-2210</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired Occupation retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 100.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2009</p> <p>Transaction ID: 90806.C20761</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Edwin Sandham</p> <p>Mailing Address 1964 SW Saint Andrews Dr</p> <p>City Palm City State FL Zip Code 34990-2210</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired Occupation retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2009</p> <p>Transaction ID: 91005.C20920</p> <p>Amount of Each Receipt this Period 150.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	750.00
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 29 / 74
(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)
Frederick W. Schaerf, MD
Mailing Address 1051 Sumica Dr
City State Zip Code
Fort Myers FL 33919-2621
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
Date of Receipt: 08 / 10 / 2009
Transaction ID: 91005.C20858
Amount of Each Receipt this Period: 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Francis Schwerin
Mailing Address PO Box 8237
City State Zip Code
Naples FL 34101-8237
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardio Diagnostic Services Occupation physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt: 08 / 05 / 2009
Transaction ID: 91005.C20834
Amount of Each Receipt this Period: 250.00
Receipt

C. 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 Self Employed Occupation attorney
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1300.00
Date of Receipt: 08 / 10 / 2009
Transaction ID: 91005.C20847
Amount of Each Receipt this Period: 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
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 30 / 74
	<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

A.	Full Name (Last, First, Middle Initial) Larry Smith	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 12 Oak Ln	Transaction ID: 91005.C21084
	City State Zip Code Scarsdale NY 10583-1622	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Sixpoint Partners Occupation finance Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Wayne O Smith	Date of Receipt MM / DD / YYYY 08 / 10 / 2009
	Mailing Address 1385 Wood Duck Trl	Transaction ID: 91005.C20808
	City State Zip Code Naples FL 34108-3317	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer retired Occupation retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) Cynthia Spalliero	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 28900 Girard Ter	Transaction ID: 91007.C21110
	City State Zip Code Naples FL 34119-0909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer TMJ Cemetery Corp Occupation office manager Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
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 / 74
(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)
Mara Talpins
Mailing Address 22 Pryer Manor Rd
City Larchmont State NY Zip Code 10538-3436
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 09 / 30 / 2009
Transaction ID: 91005.C21086
Amount of Each Receipt this Period 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Maureen Valiquette
Mailing Address 1206 Bay Drive
City Sanibel State FL Zip Code 33957-3504
FEC ID number of contributing federal political committee. **C**
Name of Employer Sandcastle Construction Co. In Occupation office manager
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 200.00
Date of Receipt 08 / 10 / 2009
Transaction ID: 91005.C20833
Amount of Each Receipt this Period 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
John Visosky
Mailing Address 5501 Heron Point Drive, #902
City Naples State FL Zip Code 34108
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 200.00
Date of Receipt 09 / 22 / 2009
Transaction ID: 91005.C21016
Amount of Each Receipt this Period 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1200.00
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 / 74
(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)
Alan Weissman

Mailing Address 60 Rye Rd

City Rye State NY Zip Code 10580-2228

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

Name of Employer Alfred Weissman Real Estate Occupation real estate developer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 1000.00

Receipt

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

Mailing Address 736 Kings Town Dr

City Naples State FL Zip Code 34102-7831

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

Name of Employer retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	39325.00

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

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

FOR LINE NUMBER: PAGE 33 / 74
(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)
Aircraft Owners & Pilots Assn. PAC

Mailing Address 601 Pennsylvania Ave., NW
Suite 875, South Bldg

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2009
Transaction ID: 91005.C20862
 Amount of Each Receipt this Period 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Airline Pilots Assn International PAC

Mailing Address 1625 Massachusetts Ave, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00379263

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 05 / 2009
Transaction ID: 91005.C20863
 Amount of Each Receipt this Period 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Arda Roc-PAC

Mailing Address 1201 15th St NW # 400

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2009
Transaction ID: 91005.C21081
 Amount of Each Receipt this Period 5000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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 / 74
(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)
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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2009

Transaction ID: 90806.C20778

Amount of Each Receipt this Period
 1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
AT&T Corporate PAC

Mailing Address 175 E Houston St # 7-A-50

City State Zip Code
San Antonio TX 78205-2255

FEC ID number of contributing federal political committee. **C** C00185124

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 14 / 2009

Transaction ID: 91005.C20967

Amount of Each Receipt this Period
 1000.00

Receipt

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

Mailing Address 1500 Market Street, 35th Fl.

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 23 / 2009

Transaction ID: 91005.C21080

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

FOR LINE NUMBER: PAGE 35 / 74
(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>A. Full Name (Last, First, Middle Initial) Committee To Elect Bill Powers</p> <p>Mailing Address 74750 Highway 111</p> <p>City State Zip Code Indian Wells CA 92210</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 205.00</p>	<p>Date of Receipt 09 / 15 / 2009</p> <p>Transaction ID: 91005.C20906</p> <p>Amount of Each Receipt this Period 205.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Covanta Energy Corporation PAC</p> <p>Mailing Address 40 Lane Rd</p> <p>City State Zip Code Fairfield NJ 07004-1012</p> <p>FEC ID number of contributing federal political committee. C C00142158</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 07 / 21 / 2009</p> <p>Transaction ID: 91005.C20797</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Credit Suisse First Boston Govt. Fund PA</p> <p>Mailing Address 1201 F Street, NW Suite 450</p> <p>City State Zip Code Washington DC 20004</p> <p>FEC ID number of contributing federal political committee. C C00111559</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 07 / 31 / 2009</p> <p>Transaction ID: 91005.C20800</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	2205.00
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 / 74
(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)
CSX Good Govt. Fund

Mailing Address 1331 Pennsylvania Avenue, NW
Suite 560

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	9	/	2	0	0	9

Transaction ID: 91005.C20795

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 801 Pennsylvania Avenue NW
Suite 220

City State Zip Code
Washington DC 20004-2604

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	9

Transaction ID: 91005.C20966

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
NRA - Political Victory Fund

Mailing Address 11250 Waples Mill Rd

City State Zip Code
Fairfax VA 22030-6003

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	9

Transaction ID: 91005.C20861

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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 / 74
(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)
Ocean Champions Pac

Mailing Address 202 San Jose Avenue

City State Zip Code
Capitola CA 95010

FEC ID number of contributing federal political committee. **C** C00393769

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 04 / 2009

Transaction ID: 90806.C20780

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Poker Players Alliance PAC

Mailing Address 1325 G St NW Ste 500
Suite 500

City State Zip Code
Washington DC 20005-3136

FEC ID number of contributing federal political committee. **C** C00448688

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2009

Transaction ID: 90806.C20779

Amount of Each Receipt this Period
1500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Progress Energy Employees Federal PAC

Mailing Address 801 Pennsylvania Ave, NW
Suite 250

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 24 / 2009

Transaction ID: 91005.C20881

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 38 / 74
(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 Home Depot Inc. PAC

Mailing Address 101 Constitution Ave. NW
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 20 / 2009

Transaction ID: 90806.C20770

Amount of Each Receipt this Period
1000.00

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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 03 / 2009

Transaction ID: 91005.C20799

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)	▶	21705.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 74
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
City Of Bonita Springs

Mailing Address 9101 Bonita Beach Rd SE

City	State	Zip Code
Bonita Springs	FL	34135-4215

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

Name of Employer	Occupation

Receipt For: 2010
 Primary
 General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	9

Transaction ID: 90806.C20773

Amount of Each Receipt this Period
350.00

Offsets to Operating Expenditure

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	350.00

**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 40 / 74

<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)
Arthur J. Finkelstein & Assoc.

Transaction ID: 90806.E5038

Date of Disbursement

Mailing Address 16 N. Astor Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

City Irvington State NY Zip Code 10533-

Amount of Each Disbursement this Period

752.24

Purpose of Disbursement
expense reimbursement

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

EXPENSE REIMBURSEMENT

State: District:

B.

Full Name (Last, First, Middle Initial)
Arthur J. Finkelstein & Assoc.

Transaction ID: 90806.E5037

Date of Disbursement

Mailing Address 16 N. Astor Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

City Irvington State NY Zip Code 10533-

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
political consulting fee

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

POLITICAL CONSULTING FEE

State: District:

C.

Full Name (Last, First, Middle Initial)
Arthur J. Finkelstein & Assoc.

Transaction ID: 91005.E5116

Date of Disbursement

Mailing Address 16 N. Astor Street

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	9

City Irvington State NY Zip Code 10533-

Amount of Each Disbursement this Period

3917.38

Purpose of Disbursement
political consulting and expense re

Category/ Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

POLITICAL CONSULTING AND
EXPENSE RE

State: District:

SUBTOTAL of Disbursements This Page (optional)

8169.62

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) Arthur J. Finkelstein & Assoc. Mailing Address 16 N. Astor Street City Irvington State NY Zip Code 10533- Purpose of Disbursement political consulting and expenses 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: 91005.E5123 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9 Amount of Each Disbursement this Period 4128.66 POLITICAL CONSULTING AND EXPENSES
B.	Full Name (Last, First, Middle Initial) Mr. Rob Jennings Mailing Address American Event Consulting, Inc. 501 L St NW City Washington State DC Zip Code 20001- Purpose of Disbursement fundraising consulting fee 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: 90710.E5031 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9 Amount of Each Disbursement this Period 1500.00 FUNDRAISING CONSULTING FEE
C.	Full Name (Last, First, Middle Initial) Mr. Rob Jennings Mailing Address American Event Consulting, Inc. 501 L St NW City Washington State DC Zip Code 20001- Purpose of Disbursement fundraising consulting fee 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: 91005.E5085 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 9 Amount of Each Disbursement this Period 1500.00 FUNDRAISING CONSULTING FEE

SUBTOTAL of Disbursements This Page (optional) ▶

7128.66

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: 91005.E5122 Date of Disbursement 09 / 02 / 2009
	Mailing Address American Event Consulting, Inc. 501 L St NW	Amount of Each Disbursement this Period 1500.00
	City: Washington State: DC Zip Code: 20001-	
	Purpose of Disbursement: fundraising consulting fee Candidate Name: _____ Category/Type: _____	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	FUNDRAISING CONSULTING FEE

B.	Full Name (Last, First, Middle Initial) Connie Mack	Transaction ID: 91005.E5086 Date of Disbursement 07 / 20 / 2009
	Mailing Address 3604 Oakland Drive	Amount of Each Disbursement this Period 320.85
	City: Alexandria State: VA Zip Code: 22310-	
	Purpose of Disbursement: REIMBURSEMENT: SEE BELOW Candidate Name: _____ Category/Type: _____	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	REIMBURSEMENT: SEE BELOW

C.	Full Name (Last, First, Middle Initial) McGintys Public House	Transaction ID: 91005.E5087 Date of Disbursement 07 / 13 / 2009
	Mailing Address 3650 S Glebe Rd	Amount of Each Disbursement this Period 320.85
	City: Arlington State: VA Zip Code: 22202-2395	
	Purpose of Disbursement: meal expense Candidate Name: _____ Category/Type: _____	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	[MEMO ITEM] MEMO: MEAL EXPENSE

SUBTOTAL of Disbursements This Page (optional)	▶	1820.85
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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. Patrick McQuillan

Transaction ID: 90806.E5036
Date of Disbursement

Mailing Address 3048 Horizon Ln Apt 1103

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	0	9

City Naples State FL Zip Code 34109-8960

Amount of Each Disbursement this Period

Purpose of Disbursement
fundraising consulting fee

Category/
Type

500.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING CONSULTING FEE

State: District:

B.

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

Transaction ID: 91005.E5089
Date of Disbursement

Mailing Address 3048 Horizon Ln Apt 1103

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	0	9

City Naples State FL Zip Code 34109-8960

Amount of Each Disbursement this Period

Purpose of Disbursement
fundraising consulting fee

Category/
Type

500.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING CONSULTING FEE

State: District:

C.

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

Transaction ID: 91005.E5121
Date of Disbursement

Mailing Address 3048 Horizon Ln Apt 1103

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Naples State FL Zip Code 34109-8960

Amount of Each Disbursement this Period

Purpose of Disbursement
fundraising consulting fee

Category/
Type

500.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING CONSULTING FEE

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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>A. Full Name (Last, First, Middle Initial) National Republican Congressional Commit</p> <p>Mailing Address 320 First Street, S.E.</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement contribution</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>Transaction ID: 90806.E5039</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>CONTRIBUTION</p>
<p>B. Full Name (Last, First, Middle Initial) National Republican Congressional Commit</p> <p>Mailing Address 320 First Street, S.E.</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement contribution</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>Transaction ID: 91005.E5115</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>CONTRIBUTION</p>
<p>C. Full Name (Last, First, Middle Initial) National Republican Congressional Commit</p> <p>Mailing Address 320 First Street, S.E.</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement contribution</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>Transaction ID: 91005.E5124</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>CONTRIBUTION</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 45 / 74

<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. 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: 91005.E5117 Date of Disbursement 08 / 07 / 2009 Amount of Each Disbursement this Period 500.00 EVENT EXPENSE- MUSICIAN
B.	Full Name (Last, First, Middle Initial) Charlotte County Republican Club Mailing Address PO Box 512332 City Punta Gorda State FL Zip Code 33951-2332 Purpose of Disbursement contribution 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: 91005.E5160 Date of Disbursement 09 / 16 / 2009 Amount of Each Disbursement this Period 100.00 CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Stan Lindsey Photography, Inc Mailing Address 4985 Tallowood Way City Naples State FL Zip Code 34116- Purpose of Disbursement Photography Service fee 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: 90806.E5045 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 337.50 PHOTOGRAPHY SERVICE FEE

SUBTOTAL of Disbursements This Page (optional) ▶	937.50
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)
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: 90710.E5032
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

6	5	9	4	.	3	6
---	---	---	---	---	---	---

CREDIT CARD: SEE BELOW

B.

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

Mailing Address 245 Water St

City State Zip Code
Jacksonville FL 32202-4417

Purpose of Disbursement
lodging

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90806.E5049
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

2	4	4	.	1	4
---	---	---	---	---	---

[MEMO ITEM]
MEMO: LODGING

C.

Full Name (Last, First, Middle Initial)
Balloons Over Ft. Myers

Mailing Address 4497 Meade Ave

City State Zip Code
Fort Myers FL 33901-8932

Purpose of Disbursement
charity event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90806.E5072
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

4	1	7	.	4	3
---	---	---	---	---	---

[MEMO ITEM]
MEMO: CHARITY EVENT

SUBTOTAL of Disbursements This Page (optional) ▶

6	5	9	4	.	3	6
---	---	---	---	---	---	---

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

6	5	9	4	.	3	6
---	---	---	---	---	---	---

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>A. Full Name (Last, First, Middle Initial) AT&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>Transaction ID: 90806.E5058</p> <p>Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 350.32</p> <p>[MEMO ITEM] MEMO: TELEPHONE SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) Capitol Hill Club</p> <p>Mailing Address 300 First Street, S.E.</p> <p>City Washington State DC 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>Transaction ID: 90806.E5065</p> <p>Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 560.35</p> <p>[MEMO ITEM] MEMO: MEALS</p>
<p>C. Full Name (Last, First, Middle Initial) Doc Fords</p> <p>Mailing Address 975 Rabbit Road</p> <p>City Naples State FL Zip Code 34102-</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>Transaction ID: 90806.E5050</p> <p>Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 56.33</p> <p>[MEMO ITEM] MEMO: MEALS</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

A.	Full Name (Last, First, Middle Initial) Embassy Suites- Estero Mailing Address 10450 Corkscrew Commons Dr City Estero State FL Zip Code 33928-9423 Purpose of Disbursement Fundraising Expense - lodging Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 90806.E5063 Date of Disbursement <input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/> Amount of Each Disbursement this Period <input type="text" value="2363.38"/> [MEMO ITEM] MEMO: FUNDRAISING EXPENSE - LODGING
B.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P. O. Box 1140 City Memphis State TN Zip Code 38101- Purpose of Disbursement express mail delivery Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 90806.E5068 Date of Disbursement <input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/> Amount of Each Disbursement this Period <input type="text" value="30.61"/> [MEMO ITEM] MEMO: EXPRESS MAIL DELIVERY
C.	Full Name (Last, First, Middle Initial) Google Mailing Address 1600 Amphitheatre Pkwy City Mountain View State CA Zip Code 94043-1351 Purpose of Disbursement advertising Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 90806.E5060 Date of Disbursement <input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/> Amount of Each Disbursement this Period <input type="text" value="236.36"/> [MEMO ITEM] MEMO: ADVERTISING

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)

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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

A.	Full Name (Last, First, Middle Initial) Pinchers Crab Shack Mailing Address 13021 N. Cleveland Ave. City North Fort Myers State FL Zip Code 33903- 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: 90806.E5052 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 91.33 [MEMO ITEM] MEMO: MEALS
B.	Full Name (Last, First, Middle Initial) Publix Mailing Address Colonial Crossings 4600 Summerlin Rd City Fort Myers State FL Zip Code 33919- 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: 90806.E5073 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 43.00 [MEMO ITEM] MEMO: MEALS
C.	Full Name (Last, First, Middle Initial) Simulscribe Inc Mailing Address 34 Broad Street City Red Bank State NJ Zip Code 07701- Purpose of Disbursement messaging 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: 90806.E5062 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 29.95 [MEMO ITEM] MEMO: MESSAGING SERVICE

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) Target Mailing Address 13711 S. Tamiami Trail City Fort Myers State FL Zip Code 33912- Purpose of Disbursement fundraising expense - event supplie 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: 90806.E5078 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 34.66 [MEMO ITEM] MEMO: FUNDRAISING EXPENSE - EVENT SUPPLIE
B.	Full Name (Last, First, Middle Initial) US Airways Mailing Address 7 Park Center City Pittsburgh State PA Zip Code 15220- Purpose of Disbursement travel expense - arline tickets 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: 90806.E5066 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 1060.80 [MEMO ITEM] MEMO: TRAVEL EXPENSE - AR-LINE TICKETS
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address Pagefield Postal Store City Fort Myers State FL Zip Code 33907-1403 Purpose of Disbursement express mail 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: 90806.E5075 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 12.10 [MEMO ITEM] MEMO: EXPRESS MAIL

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) Vergina	Transaction ID: 90806.E5059
	Mailing Address 700 5th Ave S	Date of Disbursement 07 / 09 / 2009
	City Naples State FL Zip Code 34102-6604	Amount of Each Disbursement this Period 278.05
	Purpose of Disbursement meals 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) ▼

[MEMO ITEM]
MEMO: MEALS

B.	Full Name (Last, First, Middle Initial) Vergina	Transaction ID: 90806.E5070
	Mailing Address 700 5th Ave S	Date of Disbursement 07 / 09 / 2009
	City Naples State FL Zip Code 34102-6604	Amount of Each Disbursement this Period 74.75
	Purpose of Disbursement meals 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) ▼

[MEMO ITEM]
MEMO: MEALS

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90806.E5061
	Mailing Address 131 North Court House Rd	Date of Disbursement 07 / 09 / 2009
	City Arlington State VA Zip Code 22201-	Amount of Each Disbursement this Period 168.15
	Purpose of Disbursement telephone 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) ▼

[MEMO ITEM]
MEMO: TELEPHONE SERVICE

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) American Express <hr/> Mailing Address P. O. Box 360002 <hr/> City Fort Lauderdale State FL Zip Code 33336- <hr/> Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91005.E5096 Date of Disbursement 08 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 2459.27 <hr/> CREDIT CARD: SEE BELOW
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 Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91005.E5101 Date of Disbursement 08 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 244.47 <hr/> [MEMO ITEM] MEMO: TELEPHONE SERVICE
C.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 First Street, S.E. <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement meals Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91005.E5106 Date of Disbursement 08 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 552.53 <hr/> [MEMO ITEM] MEMO: MEALS

SUBTOTAL of Disbursements This Page (optional) ▶	2459.27
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) Costco Mailing Address 7171 Cypress Lake Drive City Fort Myers State FL Zip Code 33907- Purpose of Disbursement office supplies 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: 91005.E5108 Date of Disbursement 08 / 05 / 2009 Amount of Each Disbursement this Period 104.20 [MEMO ITEM] MEMO: OFFICE SUPPLIES	
B.	Full Name (Last, First, Middle Initial) FedEx Mailing Address P. O. Box 1140 City Memphis State TN Zip Code 38101- 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: 91005.E5107 Date of Disbursement 08 / 05 / 2009 Amount of Each Disbursement this Period 83.73 [MEMO ITEM] MEMO: EXPRESS MAIL DELIVERY	
C.	Full Name (Last, First, Middle Initial) Galloway Collision Mailing Address 2649 Fowler St City Fort Myers State FL Zip Code 33901-5236 Purpose of Disbursement campaign car auto repair 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: 91005.E5109 Date of Disbursement 08 / 05 / 2009 Amount of Each Disbursement this Period 500.00 [MEMO ITEM] MEMO: CAMPAIGN CAR AUTO REPAIR	

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) Google	Transaction ID: 91005.E5102
	Mailing Address 1600 Amphitheatre Pkwy	Date of Disbursement 08 / 05 / 2009
	City Mountain View State CA Zip Code 94043-1351	Amount of Each Disbursement this Period 17.93
	Purpose of Disbursement advertising	[MEMO ITEM] MEMO: ADVERTISING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: 91005.E5105
	Mailing Address 4333 Amon Carter Blvd	Date of Disbursement 08 / 05 / 2009
	City Fort Worth State TX Zip Code 76155-	Amount of Each Disbursement this Period 466.40
	Purpose of Disbursement travel expense- airline ticket	[MEMO ITEM] MEMO: TRAVEL EXPENSE- AIR-LINE TICKET
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 91005.E5103
	Mailing Address 131 North Court House Rd	Date of Disbursement 08 / 05 / 2009
	City Arlington State VA Zip Code 22201-	Amount of Each Disbursement this Period 322.23
	Purpose of Disbursement telephone service	[MEMO ITEM] MEMO: TELEPHONE SERVICE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	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) American Express <hr/> Mailing Address P. O. Box 360002 <hr/> City Fort Lauderdale State FL Zip Code 33336- <hr/> Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Category/Type <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: 91005.E5129 Date of Disbursement 09 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 6829.87 <hr/> CREDIT CARD: SEE BELOW
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 Category/Type <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: 91005.E5131 Date of Disbursement 09 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 569.52 <hr/> [MEMO ITEM] MEMO: TELEPHONE SERVICE
C.	Full Name (Last, First, Middle Initial) Aristotle International <hr/> Mailing Address 205 Pennsylvania Avenue, SE <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement campaign software Candidate Name Category/Type <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: 91005.E5141 Date of Disbursement 09 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 2400.00 <hr/> [MEMO ITEM] MEMO: CAMPAIGN SOFTWARE

SUBTOTAL of Disbursements This Page (optional) ▶

6829.87

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

6829.87

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) Doc Fords <hr/> Mailing Address 975 Rabbit Road <hr/> City Naples State FL Zip Code 34102- <hr/> Purpose of Disbursement fundraising event expense 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: 91005.E5135 Date of Disbursement 09 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 2639.97 <hr/> [MEMO ITEM] MEMO: FUNDRAISING EVENT EXPENSE
B.	Full Name (Last, First, Middle Initial) FedEx <hr/> Mailing Address P. O. Box 1140 <hr/> City Memphis State TN Zip Code 38101- <hr/> Purpose of Disbursement express mail delivery 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: 91005.E5134 Date of Disbursement 09 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 56.31 <hr/> [MEMO ITEM] MEMO: EXPRESS MAIL DELIVERY
C.	Full Name (Last, First, Middle Initial) Florida Business Information, Inc. <hr/> Mailing Address PO Box 193 <hr/> City Bell State FL Zip Code 32619- <hr/> Purpose of Disbursement newspaper clipping 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: 91005.E5138 Date of Disbursement 09 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 125.00 <hr/> [MEMO ITEM] MEMO: NEWSPAPER CLIPPING SERVICE

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>A.</p> <p>Full Name (Last, First, Middle Initial) Taylor Rental</p> <p>Mailing Address 4472 Corporate Sq</p> <p>City Naples State FL Zip Code 34104-4755</p> <p>Purpose of Disbursement fundraising expense - event rentals</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>Transaction ID: 91005.E5139 Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 378.42</p> <p>[MEMO ITEM] MEMO: FUNDRAISING EXPENSE - EVENT RENTALS</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Tortilla Coast</p> <p>Mailing Address 400 1st Street, S.E.</p> <p>City Washington State DC Zip Code 20016-</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91005.E5130 Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 80.30</p> <p>[MEMO ITEM] MEMO: MEALS</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address Pagefield Postal Store</p> <p>City Fort Myers State FL Zip Code 33907-1403</p> <p>Purpose of Disbursement mailing supplies and postage</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>Transaction ID: 91005.E5136 Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 49.68</p> <p>[MEMO ITEM] MEMO: MAILING SUPPLIES AND POSTAGE</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

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 131 North Court House Rd</p> <p>City Arlington State VA Zip Code 22201-</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>Transaction ID: 91005.E5132</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="403.32"/></p> <p>[MEMO ITEM] MEMO: TELEPHONE SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) Arent Fox LLP</p> <p>Mailing Address 1050 Connecticut Ave NW</p> <p>City Washington State DC Zip Code 20036-5308</p> <p>Purpose of Disbursement legal accounting and admin fee</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>Transaction ID: 90806.E5041</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4865.96"/></p> <p>LEGAL ACCOUNTING AND ADMIN FEE</p>
<p>C. Full Name (Last, First, Middle Initial) Arent Fox LLP</p> <p>Mailing Address 1050 Connecticut Ave NW</p> <p>City Washington State DC Zip Code 20036-5308</p> <p>Purpose of Disbursement Legal</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>Transaction ID: 91005.E5088</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>LEGAL</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

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) Arent Fox LLP Mailing Address 1050 Connecticut Ave NW City Washington State DC Zip Code 20036-5308 Purpose of Disbursement FEC Campaign Reporting 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: 91005.E5090 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 9	Amount of Each Disbursement this Period 4416.01 FEC CAMPAIGN REPORTING
B.	Full Name (Last, First, Middle Initial) Arent Fox LLP Mailing Address 1050 Connecticut Ave NW City Washington State DC Zip Code 20036-5308 Purpose of Disbursement FEC Campaign Reporting 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: 91005.E5125 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 5549.36 FEC CAMPAIGN REPORTING
C.	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: 91005.E5155 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 9	Amount of Each Disbursement this Period 384.63 TELEPHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

10350.00

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) 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: 91005.E5156 Date of Disbursement 08 / 27 / 2009 Amount of Each Disbursement this Period 504.39 TELEPHONE SERVICE
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: 91005.E5166 Date of Disbursement 09 / 28 / 2009 Amount of Each Disbursement this Period 396.67 TELEPHONE SERVICE
C.	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) ▼	Transaction ID: 90806.E5046 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 210.56 CAMPAIGN CAR INSURANCE

SUBTOTAL of Disbursements This Page (optional) ▶

1111.62

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) 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) ▼	Transaction ID: 91005.E5094 Date of Disbursement 08 / 05 / 2009 Amount of Each Disbursement this Period 210.56 CAMPAIGN CAR INSURANCE
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) ▼	Transaction ID: 91005.E5127 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 210.56 CAMPAIGN CAR INSURANCE
C.	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: 90806.E5053 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 189.49 CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	610.61
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
Bonita Springs Self Storage

Mailing Address 8953 Terrene Court

City Bonita Springs State FL Zip Code 34135-

Purpose of Disbursement
storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90806.E5079

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

165.84

[MEMO ITEM]

MEMO: STORAGE

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 fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90806.E5054

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

Amount of Each Disbursement this Period

6.70

[MEMO ITEM]

MEMO: CREDIT CARD FEE

C.

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

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 91005.E5111

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	9

Amount of Each Disbursement this Period

333.78

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ►

333.78

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)
Bonita Springs Self Storage

Mailing Address 8953 Terrene Court

City Bonita Springs State FL Zip Code 34135-

Purpose of Disbursement
storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 91005.E5113
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	9	

Amount of Each Disbursement this Period

165.84

[MEMO ITEM]
MEMO: STORAGE

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 fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 91005.E5110
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	9	

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
MEMO: CREDIT CARD FEE

C.

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
cell phone service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 91005.E5114
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	9	

Amount of Each Disbursement this Period

125.99

[MEMO ITEM]
MEMO: CELL PHONE SERVICE

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) 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 Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91005.E5142 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 3547.98 CREDIT CARD: SEE BELOW
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 Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91005.E5144 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 165.84 [MEMO ITEM] MEMO: STORAGE
C.	Full Name (Last, First, Middle Initial) Createandsend.com Mailing Address 707 Mount Errigal Pl City Lincoln State CA Zip Code 95648-7622 Purpose of Disbursement email blast service Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91005.E5145 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 162.40 [MEMO ITEM] MEMO: EMAIL BLAST SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶	3547.98
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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) ElectionMall Mailing Address 30 S Wacker Dr Ste 2200 City Chicago State IL Zip Code 60606-7452 Purpose of Disbursement fundraising fee 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: 91005.E5148 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 395.00 [MEMO ITEM] MEMO: FUNDRAISING FEE
B.	Full Name (Last, First, Middle Initial) Google Mailing Address 1600 Amphitheatre Pkwy City Mountain View State CA Zip Code 94043-1351 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: 91005.E5146 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 146.54 [MEMO ITEM] MEMO: ADVERTISING
C.	Full Name (Last, First, Middle Initial) Ritz Camera Mailing Address 233 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1121 Purpose of Disbursement event supplies 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: 91005.E5150 Date of Disbursement 09 / 03 / 2009 Amount of Each Disbursement this Period 202.56 [MEMO ITEM] MEMO: EVENT SUPPLIES

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>A. 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 mailing supplies and postage</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>Transaction ID: 91005.E5152</p> <p>Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 70.60</p> <p>[MEMO ITEM] MEMO: MAILING SUPPLIES AND POSTAGE</p>
<p>B. Full Name (Last, First, Middle Initial) Bobby Vans Grille</p> <p>Mailing Address 1201 New York Ave, NW</p> <p>City Washington State DC Zip Code 20005-</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>Transaction ID: 91005.E5147</p> <p>Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 2361.05</p> <p>[MEMO ITEM] MEMO: EVENT CATERING</p>
<p>C. Full Name (Last, First, Middle Initial) Millers Ale House</p> <p>Mailing Address 6320 Hollywood Blvd</p> <p>City Naples State FL Zip Code 34109-</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>Transaction ID: 91005.E5149</p> <p>Date of Disbursement 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 27.04</p> <p>[MEMO ITEM] MEMO: MEALS</p>

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

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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

A.	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 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: 90806.E5082 Date of Disbursement 07 / 14 / 2009 Amount of Each Disbursement this Period 94.88 FUNDRAISING FEE
B.	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 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: 91005.E5119 Date of Disbursement 08 / 25 / 2009 Amount of Each Disbursement this Period 77.60 FUNDRAISING FEE
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 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: 91005.E5168 Date of Disbursement 09 / 14 / 2009 Amount of Each Disbursement this Period 31.00 FUNDRAISING FEE

SUBTOTAL of Disbursements This Page (optional) ▶	203.48
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 68 / 74

<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 Mailing Address 118 N Saint Asaph St City Alexandria State VA Zip Code 22314-3110 Purpose of Disbursement fundraising fee 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: 91005.E5165 Date of Disbursement 09 / 30 / 2009 Amount of Each Disbursement this Period 469.63 FUNDRAISING FEE
B.	Full Name (Last, First, Middle Initial) Florida Business Information, Inc. Mailing Address PO Box 193 City Bell State FL Zip Code 32619- 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: 90806.E5042 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 130.00 NEWSPAPER CLIPPING SERVICE
C.	Full Name (Last, First, Middle Initial) Ford Credit Mailing Address PO Box 105697 City Atlanta State GA Zip Code 30348-5697 Purpose of Disbursement campaign car 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: 90806.E5055 Date of Disbursement 07 / 10 / 2009 Amount of Each Disbursement this Period 635.71 CAMPAIGN CAR

SUBTOTAL of Disbursements This Page (optional) ▶

1235.34

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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

A. Full Name (Last, First, Middle Initial) Ford Credit <hr/> Mailing Address PO Box 105697 <hr/> City Atlanta State GA Zip Code 30348-5697 <hr/> Purpose of Disbursement campaign car 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: 91005.E5095 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 635.71
	Category/Type CAMPAIGN CAR
	Full Name (Last, First, Middle Initial) Ford Credit <hr/> Mailing Address PO Box 105697 <hr/> City Atlanta State GA Zip Code 30348-5697 <hr/> Purpose of Disbursement campaign car 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) ▼
Amount of Each Disbursement this Period 635.71	
Category/Type CAMPAIGN CAR	
C. Full Name (Last, First, Middle Initial) Jivaldi LLC <hr/> Mailing Address 707 MOUNT Errigal PI <hr/> City Lincoln State CA Zip Code 95648- <hr/> Purpose of Disbursement website service fee 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: 90806.E5043 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 318.75
	Category/Type WEBSITE SERVICE FEE
	Full Name (Last, First, Middle Initial) Jivaldi LLC <hr/> Mailing Address 707 MOUNT Errigal PI <hr/> City Lincoln State CA Zip Code 95648- <hr/> Purpose of Disbursement website service fee 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) ▼
Amount of Each Disbursement this Period 318.75	
Category/Type WEBSITE SERVICE FEE	

SUBTOTAL of Disbursements This Page (optional) ▶

1590.17

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) Jivaldi LLC <hr/> Mailing Address 707 MOUNT Errigal Pl <hr/> City Lincoln State CA Zip Code 95648- <hr/> Purpose of Disbursement website service fee 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: 91005.E5092 Date of Disbursement 08 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 350.00 <hr/> WEBSITE SERVICE FEE
B.	Full Name (Last, First, Middle Initial) SCM Associates, Inc. <hr/> Mailing Address 1283 Main Street PO Box 254 <hr/> City Dublin State NH Zip Code 03444- <hr/> Purpose of Disbursement direct mail and telemarketing 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: 90806.E5040 Date of Disbursement 07 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 4495.33 <hr/> DIRECT MAIL AND TELEMARKING
C.	Full Name (Last, First, Middle Initial) SCM Associates, Inc. <hr/> Mailing Address 1283 Main Street PO Box 254 <hr/> City Dublin State NH Zip Code 03444- <hr/> Purpose of Disbursement direct mail and telemarketing 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: 91005.E5153 Date of Disbursement 09 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 10910.80 <hr/> DIRECT MAIL AND TELEMARKETING

SUBTOTAL of Disbursements This Page (optional) ▶	15756.13
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) Sprint - Embarq <hr/> Mailing Address P.O. Box 740602 <hr/> City Cincinnati State OH Zip Code 45274- <hr/> Purpose of Disbursement telephone 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: 90806.E5057 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 79.01
	Category/Type TELEPHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sprint - Embarq <hr/> Mailing Address P.O. Box 740602 <hr/> City Cincinnati State OH Zip Code 45274- <hr/> Purpose of Disbursement telephone 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: 91005.E5091 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 78.79
	Category/Type TELEPHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sprint - Embarq <hr/> Mailing Address P.O. Box 740602 <hr/> City Cincinnati State OH Zip Code 45274- <hr/> Purpose of Disbursement telephone 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: 91005.E5126 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 70.63
	Category/Type TELEPHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

228.43

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

A.	Full Name (Last, First, Middle Initial) USPS Mailing Address 1050 Connecticut Ave, NW City Washington State DC Zip Code 20036- Purpose of Disbursement postage 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: 90806.E5081 Date of Disbursement 07 / 10 / 2009	Amount of Each Disbursement this Period 176.00 POSTAGE
B.	Full Name (Last, First, Middle Initial) USPS Mailing Address 1050 Connecticut Ave, NW City Washington State DC Zip Code 20036- Purpose of Disbursement postage 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: 91005.E5120 Date of Disbursement 08 / 28 / 2009	Amount of Each Disbursement this Period 176.00 POSTAGE
C.	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: 90806.E5044 Date of Disbursement 07 / 09 / 2009	Amount of Each Disbursement this Period 374.75 BLACKBERRY SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶	726.75
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

A.

Full Name (Last, First, Middle Initial)
Yuma Solutions, Inc.

Transaction ID: 91005.E5093

Date of Disbursement

Mailing Address 1922 Miccosukee Road

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	9

City State Zip Code
Tallahassee FL 32308-

Amount of Each Disbursement this Period

623.40

Purpose of Disbursement
blackberry service

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

BLACKBERRY SERVICE

State: District:

SUBTOTAL of Disbursements This Page (optional)

623.40

TOTAL This Period (last page this line number only)

87623.78

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)

<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)
Friends Of Dave Reichert

Transaction ID: 91005.E5159
Date of Disbursement

Mailing Address PO Box 53322

^M 0	^M 9	/	^D 1	^D 5	/	^Y 2	^Y 0	^Y 0	^Y 9
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City Bellevue State WA Zip Code 98015-3322

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

CONTRIBUTION

Category/
Type

Candidate Name
DAVE REICHERT

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: WA District: 08

B.

Full Name (Last, First, Middle Initial)
Ken Calvert For Congress

Transaction ID: 91005.E5157
Date of Disbursement

Mailing Address PO Box 20123

^M 0	^M 9	/	^D 1	^D 5	/	^Y 2	^Y 0	^Y 0	^Y 9
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City Riverside State CA Zip Code 92516-0123

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Lungren For Congress

Transaction ID: 91005.E5158
Date of Disbursement

Mailing Address PO Box 3006

^M 0	^M 9	/	^D 1	^D 5	/	^Y 2	^Y 0	^Y 0	^Y 9
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City Guerneville State CA Zip Code 95446-3006

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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

1500.00