

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
Reform Washington

ADDRESS (number and street) 610 S. Boulevard  
 Check if different than previously reported. (ACC) Tampa FL 33606

2. **FEC IDENTIFICATION NUMBER** C00575456 **CITY** **STATE** **ZIP CODE**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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

Type or Print Name of Treasurer Nancy H. Watkins

Signature of Treasurer Nancy H. Watkins *[Electronically Filed]* Date 07 / 31 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Reform Washington

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="744642.10"/>	<input type="text" value="744642.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="744642.10"/>	<input type="text" value="744642.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2796.47"/>	<input type="text" value="2796.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="741845.63"/>	<input type="text" value="741845.63"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Rev. 06/2004)

Write or Type Committee Name

**Reform Washington**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	734547.49	734547.49
(ii) Unitemized .....	94.61	94.61
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	734642.10	734642.10
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	744642.10	744642.10
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	744642.10	744642.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	744642.10	744642.10

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2796.47	2796.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2796.47	2796.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2796.47	2796.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2796.47	2796.47

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	744642.10	744642.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	744642.10	744642.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2796.47	2796.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2796.47	2796.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Reform Washington**

**A. 120 Ocean Drive, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 330609  
 City Miami State FL Zip Code 33233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4214**  
 Amount of Each Receipt this Period  
 5000.00

**B. A. Vicky Garcia-Toledo, P.A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1450 Brickell Avenue, 23rd Floor  
 City Miami State FL Zip Code 33131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4198**  
 Amount of Each Receipt this Period  
 1000.00

**C. Sebastian Aleksander**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3583 Mossy Creek Lane  
 City Tallahassee State FL Zip Code 32311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 The Aleksander Group owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4242**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 41
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Allconcept, Inc.**

Mailing Address 150 Alhambra Circle, #800

City Coral Gables	State FL	Zip Code 33134
----------------------	-------------	-------------------

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
6250.00

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

Mailing Address 333 S.E. 2nd Avenue, 44th Floor

City Miami	State FL	Zip Code 33131
---------------	-------------	-------------------

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

Name of Employer Greenberg Traurig	Occupation chairman
---------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

**Transaction ID : SA11AI.4163**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Rex M. Barker**

Mailing Address 3255 S.W. 59th Avenue

City Miami	State FL	Zip Code 33155
---------------	-------------	-------------------

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

Name of Employer J. Milton & Associates	Occupation c.f.o.
--	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

**Transaction ID : SA11AI.4313**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Benworth Capital Partners, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7000 S.W. 97th Avenue, #201  
 City Miami State FL Zip Code 33173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4144**  
 Amount of Each Receipt this Period  
 1000.00

**B. Norman Braman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2060 Biscayne Blvd., 2nd Floor  
 City Miami State FL Zip Code 33137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Braman Motors, Inc. auto dealer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2015  
**Transaction ID : SA11AI.4101**  
 Amount of Each Receipt this Period  
 100000.00

**C. Marc E. Brandes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18851 N.E. 29th Avenue, #303  
 City Aventura State FL Zip Code 33180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Kurkin Brandes LLP attorney  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4261**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Brickell Motors**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 665 S.W. 8th Street  
 City Miami State FL Zip Code 33130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1535.45

Date of Receipt  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4250**  
 Amount of Each Receipt this Period  
 1535.45  
 In-kind - catering

**B. Alejandro Brito**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8790 S.W. 76th Street  
 City Miami State FL Zip Code 33173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Zarco Einhorn Salkowski Brito attorney  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4156**  
 Amount of Each Receipt this Period  
 500.00

**C. Brookwood Center, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1060 E. 33rd Street  
 City Hialeah State FL Zip Code 33013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4276**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2535.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Gabriel M. Bustamante**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1210 Placetas Avenue  
 City Coral Gables State FL Zip Code 33146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bayshore Advisors Occupation accountant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4300**  
 Amount of Each Receipt this Period  
 1000.00

**B. C.A.P. Government, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 343 Almeria Avenue  
 City Coral Gables State FL Zip Code 33134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4220**  
 Amount of Each Receipt this Period  
 2500.00

**C. Capitol Insight, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 421 Meridian Place  
 City Tallahassee State FL Zip Code 32303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2015  
**Transaction ID : SA11AI.4169**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 41  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Carmichan Holdings Corp.**

Mailing Address P. O. Box 145120

City State Zip Code  
Coral Gables FL 33114

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4268**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Century at Giralda Avenue, LLC**

Mailing Address P. O. Box 261358

City State Zip Code  
Miami FL 33126

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4121**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Century Health Investments, LLC**

Mailing Address P. O. Box 261358

City State Zip Code  
Miami FL 33126

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4117**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Century Homebuilders Group, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 261358  
 City Miami State FL Zip Code 33126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4123**  
 Amount of Each Receipt this Period  
 1000.00

**B. Century Laguna, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 261358  
 City Miami State FL Zip Code 33126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4119**  
 Amount of Each Receipt this Period  
 1000.00

**C. Gerret Copeland Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 242 S. Washington Blvd., PMB 361  
 City Sarasota State FL Zip Code 34236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self-employed real estate  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1112.04

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015  
**Transaction ID : SA11AI.4172**  
 Amount of Each Receipt this Period  
 1112.04  
 In-kind - food & beverage

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3112.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Gerret Copeland Jr.**

Mailing Address 242 S. Washington Blvd., PMB 361

City Sarasota	State FL	Zip Code 34236
------------------	-------------	-------------------

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

Name of Employer self-employed	Occupation real estate
-----------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6112.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : SA11AI.4234**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 610 S. Boulevard

City Tampa	State FL	Zip Code 33606
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : SA11AI.4336**

Amount of Each Receipt this Period  
1500.00

state level PAC-non federal

Full Name (Last, First, Middle Initial)  
**C. David PR Group, Inc.**

Mailing Address 9990 S.W. 77th Avenue, #304

City Miami	State FL	Zip Code 33156
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : SA11AI.4270**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 41  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. DFG I, LLC**

Mailing Address 13762 W. State Road 84, #615

City State Zip Code  
Davie FL 33325

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4184**

Amount of Each Receipt this Period  
10000.00

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

Mailing Address 9817 S.W. 58th Street

City State Zip Code  
Miami FL 33173

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

Name of Employer Occupation  
All American Containers, Inc. vice-president/sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4236**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. DiMare Homestead, Inc.**

Mailing Address P. O. Box 900460

City State Zip Code  
Homestead FL 33090

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : SA11AI.4105**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. DP Real Estate Holdings, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2700 S.W. 8th Street  
 City Miami State FL Zip Code 33135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4113**  
 Amount of Each Receipt this Period  
 5000.00

**B. Dyal Corp.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1228 Alton Road  
 City Miami Beach State FL Zip Code 33139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2015  
**Transaction ID : SA11AI.4224**  
 Amount of Each Receipt this Period  
 2200.00

**C. Roger F. Fabelo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9225 Collins Avenue, #511  
 City Surfside State FL Zip Code 33154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Logtech Services Corp. president  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4148**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial) <b>A. George Feldenkreis</b>		Date of Receipt MM / DD / YYYY 06 / 23 / 2015 <b>Transaction ID : SA11AI.4138</b>
Mailing Address 3000 N.W. 107th Avenue		Amount of Each Receipt this Period 1000.00
City Miami	State FL	Zip Code 33172
FEC ID number of contributing federal political committee. C	Name of Employer Perry Ellis International	Occupation c.e.o.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. William K. Fischer</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 <b>Transaction ID : SA11AI.4288</b>
Mailing Address 2840 W. Lake Vista Circle		Amount of Each Receipt this Period 500.00
City Davie	State FL	Zip Code 33328
FEC ID number of contributing federal political committee. C	Name of Employer Merrill Lynch	Occupation stock broker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Floridians United for Our Children's Future</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2015 <b>Transaction ID : SA11AI.4315</b>
Mailing Address P. O. Box 10085		Amount of Each Receipt this Period 15000.00
City Tallahassee	State FL	Zip Code 32302
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Floridians United for Our Children's Future**

Mailing Address P. O. Box 10085

City State Zip Code  
Tallahassee FL 32302

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015  
**Transaction ID : SA11AI.4316**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**B. David L. Flory**

Mailing Address 50 S. Pointe Drive, #2008

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 18 / 2015  
**Transaction ID : SA11AI.4115**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Foundation for America's Families, Inc.**

Mailing Address 5730 Corporate Way, #214

City State Zip Code  
West Palm Beach FL 33407

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2015  
**Transaction ID : SA11AI.4311**

Amount of Each Receipt this Period  
25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. G-T Construction Group, Inc.**

Mailing Address 2520 S.W. 22nd Street, #2-169

City Miami	State FL	Zip Code 33145
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Galloway Medical Park II Corp.**

Mailing Address 150 Alhambra Circle, #800

City Coral Gables	State FL	Zip Code 33134
----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4180**

Amount of Each Receipt this Period  
12500.00

Full Name (Last, First, Middle Initial)  
**C. Global Projects, Inc.**

Mailing Address P. O. Box 331871

City Miami	State FL	Zip Code 33233
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4298**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	14500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Joseph G. Goldstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 Meridian Avenue, #316  
 City Miami Beach State FL Zip Code 33139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Holland & Knight, LLP Occupation attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4296**  
 Amount of Each Receipt this Period  
**1000.00**

**B. Michael S. Gordon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 Grove Isle Drive, #1801  
 City Coconut Grove State FL Zip Code 33133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Michael S. Gordon, Inc. Occupation physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2015  
**Transaction ID : SA11AI.4109**  
 Amount of Each Receipt this Period  
**10000.00**

**C. Mary Grathouse**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6014 Courtside Drive  
 City Bradenton State FL Zip Code 34210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation unemployed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4238**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>12000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Gutierrez Properties, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3175 S.W. 8th Street  
 City Miami State FL Zip Code 33135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4196**  
 Amount of Each Receipt this Period  
**1000.00**

**B. Melissa Howard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16315 Clearlake Avenue  
 City Lakewood Ranch State FL Zip Code 34202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self-employed real estate investor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4232**  
 Amount of Each Receipt this Period  
**2000.00**

**C. H. Wayne Huisenga Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16191 Quiet Vista Circle  
 City Delray Beach State FL Zip Code 33446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rybovich c.e.o.  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015  
**Transaction ID : SA11AI.4254**  
 Amount of Each Receipt this Period  
**2500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Nicholas Iarossi**

Mailing Address 4556 Grove Park Drive

City State Zip Code  
Tallahassee FL 32311

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

Name of Employer Occupation  
Capital City Consulting consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2015

**Transaction ID : SA11AI.4165**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 1623 S.W. 23rd Street

City State Zip Code  
Miami FL 33145

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2015

**Transaction ID : SA11AI.4294**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Investments of America No. 1, Inc.**

Mailing Address 150 Alhambra Circle, #800

City State Zip Code  
Coral Gables FL 33134

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 24 / 2015

**Transaction ID : SA11AI.4176**

Amount of Each Receipt this Period  
6250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Islas Canarias Restaurant**

Mailing Address 13695 S.W. 26th Street

City Miami	State FL	Zip Code 33175
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4218**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**B. J/S Commercial Realty, Inc.**

Mailing Address 150 Alhambra Circle, #925

City Coral Gables	State FL	Zip Code 33134
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4182**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Jose R. Gomez, C.P.A., P.A.**

Mailing Address 1400 S.W. 27th Avenue, #102

City Miami	State FL	Zip Code 33145
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4274**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Ezra Katz**  
Full Name (Last, First, Middle Initial)

Mailing Address 2665 S. Bayshore Drive, #PH2A

City Miami	State FL	Zip Code 33133
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FEC ID number of contributing federal political committee. **C**

Name of Employer Aztec Group, Inc.	Occupation real estate broker
---------------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2015

**Transaction ID : SA11AI.4127**

Amount of Each Receipt this Period  
5000.00

**B. Alex P. Lastra**  
Full Name (Last, First, Middle Initial)

Mailing Address 901 Brickell Key Blvd., #2005

City Miami	State FL	Zip Code 33131
---------------	-------------	-------------------

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

Name of Employer Atlantic/Pacific	Occupation real estate developer
--------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2015

**Transaction ID : SA11AI.4140**

Amount of Each Receipt this Period  
2500.00

**C. Leon Advertising & Public Relations**  
Full Name (Last, First, Middle Initial)

Mailing Address 8600 N.W. 41st Street

City Doral	State FL	Zip Code 33166
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.4280**

Amount of Each Receipt this Period  
50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	57500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Lincoln Square Center, LLC**

Mailing Address 1060 E. 33rd Street

City State Zip Code  
Hialeah FL 33013

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Link Construction Group, Inc.**

Mailing Address 7003 N. Waterway Drive, #218

City State Zip Code  
Miami FL 33155

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
06 / 22 / 2015  
**Transaction ID : SA11AI.4160**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MAHB Companies**

Mailing Address 9400 S. Dadeland Blvd., #100

City State Zip Code  
Miami FL 33156

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.4282**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. MAM Title Consultants**

Full Name (Last, First, Middle Initial)  
Mailing Address 12700 Biscayne Blvd.

City North Miami State FL Zip Code 33181

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4266**

Amount of Each Receipt this Period  
5000.00

**B. Manuel Kadre, P.A.**

Full Name (Last, First, Middle Initial)  
Mailing Address 5345 Hammock Drive

City Coral Gables State FL Zip Code 33156

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4263**

Amount of Each Receipt this Period  
5000.00

**C. Mase Lara, P.A.**

Full Name (Last, First, Middle Initial)  
Mailing Address 2601 S. Bayshore Drive, #800

City Miami State FL Zip Code 33133

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4142**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Meuchadim of Florida, Ltd.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6100 Hollywood Blvd., #407  
 City Hollywood State FL Zip Code 33024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4202**  
 Amount of Each Receipt this Period  
 25000.00

**B. Carlos A. Migoya**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3133 Devon Road  
 City Miami State FL Zip Code 33133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Jackson Health System president  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4286**  
 Amount of Each Receipt this Period  
 5000.00

**C. Claudio Miro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 564 S.W. 42nd Avenue  
 City Miami State FL Zip Code 33134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 self-employed dentist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4136**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 27 OF 41  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

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

Mailing Address 3876 W. Millers Bridge Road

City State Zip Code  
Tallahassee FL 32312

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

Name of Employer Occupation  
Southern Strategy Group govt. affairs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2015  
**Transaction ID : SA11AI.4107**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3416 S.W. 24th Street

City State Zip Code  
Miami FL 33145

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

Name of Employer Occupation  
Allstate Custom Paint and Body owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4259**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Domingo R. Moreira**

Mailing Address 8600 S.W. 52nd Avenue

City State Zip Code  
Miami FL 33143

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

Name of Employer Occupation  
Maya Sales, LLC executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4306**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Morrison Brown Argiz & Farra, LLC**

Mailing Address 1450 Brickell Avenue, 18th Floor

City Miami	State FL	Zip Code 33131
---------------	-------------	-------------------

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

Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 7231 Sunset Drive

City Miami	State FL	Zip Code 33143
---------------	-------------	-------------------

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

Name of Employer Munilla Construction Mgmt.	Occupation president
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
06 / 24 / 2015  
**Transaction ID : SA11AI.4190**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Madeleine Munilla**

Mailing Address 7277 Sunset Drive

City Miami	State FL	Zip Code 33143
---------------	-------------	-------------------

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

Name of Employer Advance Realty Mgmt.	Occupation real estate agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.4284**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Mario Murgado**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 665 S.W. 8th Street  
 City Miami State FL Zip Code 33130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Brickell Motors Occupation president  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **20000.00**

Date of Receipt **06 / 30 / 2015**  
**Transaction ID : SA11AI.4302**  
 Amount of Each Receipt this Period **20000.00**

**B. Patrick K. Neal**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5800 Lakewood Ranch Blvd.  
 City Sarasota State FL Zip Code 34240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Neal Communities Occupation president  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **06 / 29 / 2015**  
**Transaction ID : SA11AI.4257**  
 Amount of Each Receipt this Period **2500.00**

**C. Pan American Coral Terrace, Ltd.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 Alhambra Circle, #925  
 City Coral Gables State FL Zip Code 33134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **50000.00**

Date of Receipt **06 / 30 / 2015**  
**Transaction ID : SA11AI.4290**  
 Amount of Each Receipt this Period **50000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>72500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. People's Trust PAC**

Mailing Address 18 People's Trust Way

City State Zip Code  
Deerfield Beach FL 33441

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
06 / 24 / 2015  
**Transaction ID : SA11AI.4334**

Amount of Each Receipt this Period  
2500.00  
state level PAC-non federal

Full Name (Last, First, Middle Initial)  
**B. Private Lending Group, LLC**

Mailing Address P. O. Box 261358

City State Zip Code  
Miami FL 33126

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
06 / 18 / 2015  
**Transaction ID : SA11AI.4125**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. R. D and B Properties**

Mailing Address 1228 Alton Road

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1800.00

Date of Receipt  
06 / 25 / 2015  
**Transaction ID : SA11AI.4222**

Amount of Each Receipt this Period  
1800.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Raynier Echevarria, P.A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2851 Coral Way  
 City Miami State FL Zip Code 33145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4146**  
 Amount of Each Receipt this Period  
 300.00

**B. Manny Ribadeo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13200 S.W. 128th Street, Bldg. G.  
 City Miami State FL Zip Code 33186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Employer Benefits Consulting insurance consultant  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4308**  
 Amount of Each Receipt this Period  
 300.00

**C. Irasema Rico**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13250 S.W. 53rd Street  
 City Miami State FL Zip Code 33175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 n/a homemaker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4188**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. RJH Investments, Inc.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7700 N. Kendall Drive, #802

City Miami	State FL	Zip Code 33156
---------------	-------------	-------------------

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

Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
06 / 24 / 2015  
**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
50000.00

**B. Claudio Rodriguez**  
Full Name (Last, First, Middle Initial)  
Mailing Address 190 Cocoplum Road

City Coral Gables	State FL	Zip Code 33143
----------------------	-------------	-------------------

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

Name of Employer Morrison Meat Packers	Occupation president
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
06 / 24 / 2015  
**Transaction ID : SA11AI.4186**

Amount of Each Receipt this Period  
10000.00

**C. S. Pike Rowley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 W. Cypress Creek Road, #350

City Fort Lauderdale	State FL	Zip Code 33309
-------------------------	-------------	-------------------

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

Name of Employer Avison Young	Occupation principal
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 29 / 2015  
**Transaction ID : SA11AI.4322**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Richard E. Schatz**

Mailing Address 150 W. Flagler Street

City Miami State FL Zip Code 33130

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

Name of Employer Stearns Weaver Miller Occupation attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4304**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Simply Smiles Miami**

Mailing Address 8441 S.W. 132nd Street

City Miami State FL Zip Code 33156

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4132**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Sintavia, LLC**

Mailing Address 6545 Nova Drive, #207

City Davie State FL Zip Code 33317

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2015  
**Transaction ID : SA11AI.4111**

Amount of Each Receipt this Period  
10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Slon Capital, LLC**

Mailing Address 7647 S.W. 54th Court

City Miami	State FL	Zip Code 33143
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : SA11AI.4167**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 6321 Daniels Parkway, #200

City Fort Myers	State FL	Zip Code 33912
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2015

**Transaction ID : SA11AI.4252**

Amount of Each Receipt this Period  
30000.00

Full Name (Last, First, Middle Initial)  
**C. Terra Doral Commons, LLC**

Mailing Address P. O. Box 330609

City Miami	State FL	Zip Code 33233
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015

**Transaction ID : SA11AI.4210**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 41  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Terra Grove Communities, LLC**

Mailing Address P. O. Box 330609

City State Zip Code  
Miami FL 33233

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4212**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Terra International Developments, LLC**

Mailing Address P. O. Box 330609

City State Zip Code  
Miami FL 33233

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4208**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Terra Weston Residential, LLC**

Mailing Address P. O. Box 330609

City State Zip Code  
Miami FL 33233

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4206**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 41  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. Tesla Engineering, Inc.**

Mailing Address 17910 S.W. 137th Court

City State Zip Code  
Miami FL 33177

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4152**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 110 S.E. 6th Street

City State Zip Code  
Fort Lauderdale FL 33301

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4320**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. TWC Family Limited Partnership**

Mailing Address 6301 S.W. 33rd Street

City State Zip Code  
Miami FL 33155

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7250.00

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

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

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

FOR LINE NUMBER: PAGE 37 OF 41  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. United States Sugar Corporation**

Mailing Address 111 Ponce de Leon Avenue

City State Zip Code  
Clewiston FL 33440

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2015  
**Transaction ID : SA11AI.4216**

Amount of Each Receipt this Period  
50000.00

Full Name (Last, First, Middle Initial)  
**B. V3 Partners, LLC**

Mailing Address 4320 W. Kennedy Blvd.

City State Zip Code  
Tampa FL 33609

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4229**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**C. Vacation Store of Miami, Inc.**

Mailing Address 4201 S.W. 11th Street

City State Zip Code  
Miami FL 33134

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2015  
**Transaction ID : SA11AI.4150**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Andres Vega**  
Full Name (Last, First, Middle Initial)

Mailing Address 460 Costanera Road

City Coral Gables State FL Zip Code 33143

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

Name of Employer self-employed Occupation physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 22 / 2015  
**Transaction ID : SA11AI.4158**

Amount of Each Receipt this Period  
250.00

**B. Wayne Rosen, Inc.**  
Full Name (Last, First, Middle Initial)

Mailing Address 277 Galeon Court

City Coral Gables State FL Zip Code 33143

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
06 / 24 / 2015  
**Transaction ID : SA11AI.4194**

Amount of Each Receipt this Period  
1000.00

**C. West Flagler Associates, Ltd.**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 350940

City Miami State FL Zip Code 33135

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt  
06 / 09 / 2015  
**Transaction ID : SA11AI.4104**

Amount of Each Receipt this Period  
6000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial)  
**A. F. Lawrence Woods**

Mailing Address 2845 N.E. 9th Street, #404

City Fort Lauderdale	State FL	Zip Code 33304
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FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Financial Svcs. Co.	Occupation investment banker
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2015  
**Transaction ID : SA11AI.4226**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 4516 W. Vasconia Street

City Tampa	State FL	Zip Code 33629
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FEC ID number of contributing federal political committee. **C**

Name of Employer Holland & Knight	Occupation attorney
--------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4240**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Zambrano Family Limited Partnership**

Mailing Address 13999 Old Cutler Road

City Palmetto Bay	State FL	Zip Code 33158
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.4292**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	734547.49

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

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

FOR LINE NUMBER: PAGE 40 OF 41  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Reform Washington**

**A. Cemex Inc. Employees PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 929 Gessner Road, #1900  
City Houston State TX Zip Code 77024  
FEC ID number of contributing federal political committee. **C** C00111880  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2015  
**Transaction ID : SA11C.4200**  
Amount of Each Receipt this Period  
10000.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Reform Washington**

Full Name (Last, First, Middle Initial) <b>A. Brickell Motors</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 665 S.W. 8th Street		<b>Transaction ID : SB21B.4251</b>
City Miami	State FL	
Zip Code 33130	Purpose of Disbursement In-kind - catering	Amount of Each Disbursement this Period 1535.45
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:		

Full Name (Last, First, Middle Initial) <b>B. Gerret Copeland Jr.</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 242 S. Washington Blvd., PMB 361		<b>Transaction ID : SB21B.4173</b>
City Sarasota	State FL	
Zip Code 34236	Purpose of Disbursement In-kind - food & beverage	Amount of Each Disbursement this Period 1112.04
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		<b>Transaction ID :</b>
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2647.49
<b>TOTAL</b> This Period (last page this line number only).....▶	2647.49