

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

Office Use Only LT 5M 1:32

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 FEC MAIL CENTER

Dr. Jean L. Enright for Congress

ADDRESS (number and street) P O BOX 30232

Check if different than previously reported. (ACC)

Palm Beach Gardens FL 33420

2. FEC IDENTIFICATION NUMBER C00549238 3. IS THIS REPORT NEW OR AMENDED X NEW OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT FL 20

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 07 01 2013 through 09 30 2013

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 Regina Williams

Signature of Treasurer [Signature]

Date 10 14 2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

13031130164

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Dr. Jean L Enright for Congress

Report Covering the Period: From: 07 ' 01 ' 2013 To: 09 ' 30 ' 2013

13031130165

	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))	20,565.00	20,565.00
(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))	20,565.00	20,565.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	543.63	543.63
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	543.63	543.63
8. Cash on Hand at Close of Reporting Period (from Line 27)	20,021.37	
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

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

Dr. Jean L. Enright for Congress

Report Covering the Period: From: **07 ' 01 ' 2013**

To: **09 ' 30 ' 2013**

I. RECEIPTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

19,065.00

(ii) Unitemized.....

.00

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

500.00

(c) Other Political Committees (such as PACs).....

1,000.00

(d) The Candidate.....

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

20,565.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

(b) All Other Loans.....

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)

20,565.00

99102130166

DETAILED SUMMARY PAGE
of Disbursements

13031130167

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	, 543.63	, , .
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	, , 0.00	, , .
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	, , 0.00	, , .
(b) Of All Other Loans	, , 0.00	, , .
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	, , 0.00	, , .
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	, , 0.00	, , .
(b) Political Party Committees.....	, , 0.00	, , .
(c) Other Political Committees (such as PACs)	, , 0.00	, , .
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	, , 0.00	, , .
21. OTHER DISBURSEMENTS	, , 0.00	, , .
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	, 543.63	, , .

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	, , 0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	, 20,565.00
25. SUBTOTAL (add Line 23 and Line 24).....	, 20,565.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	, 543.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	, 20,021.37

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 23
(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) Dr. Jean L. Enright for Congress

A. Full Name (Last, First, Middle Initial) Gehring Klif Jon
 Mailing Address 334 Jacaranda Drive
 City Jupiter State FL Zip Code 33458
 Date of Receipt 08'01'2013
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Insurance
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 250.00

B. Full Name (Last, First, Middle Initial) Enright Shayla
 Mailing Address P.O. Box 626
 City Boca Raton State FL Zip Code 33429
 Date of Receipt 08'14'2013
 Amount of Each Receipt this Period 5.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation student
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 5.00
Via ActBlue

C. Full Name (Last, First, Middle Initial) Aliu Patrick
 Mailing Address 7806 Fernleaf Drive
 City Orlando State FL Zip Code 32836
 Date of Receipt 08'15'2013
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Self PSA Contractors Occupation Architect
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 100.00
Via ActBlue

SUBTOTAL of Receipts This Page (optional)..... 355.00
TOTAL This Period (last page this line number only).....

891051130168

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 **2** OF **23**

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

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

15032130169

Full Name (Last, First, Middle Initial) A. Kaczwarra Jarra		Date of Receipt 08 ' 16 ' 2013	
Mailing Address 312 Saint Lucia Lane			
City Jupiter	State FL	Zip Code 33458	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00 Via ActBlue	
Name of Employer Port of Palm Beach	Occupation Director Buss Dvpmtn		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 50.00	
Full Name (Last, First, Middle Initial) B. Sowers Joyce		Date of Receipt 08 ' 17 ' 2013	
Mailing Address 529 S.W. 16th Street			
City Boynton Beach	State FL	Zip Code 33426	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00 Via ActBlue	
Name of Employer none	Occupation retired		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 25.00	
Full Name (Last, First, Middle Initial) c. Picken Gregory C.		Date of Receipt 08 ' 19 ' 2013	
Mailing Address 15 Wyndham Lane			
City Palm Beach Gardens	State FL	Zip Code 33418	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Law Offices Gary, Dutrych & Ryan	Occupation Attorney		
Receipt For: <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).....		575.00	
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 3 OF 23

<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)

Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)

A. Baer Lori

Mailing Address

1211 Polk Street

City

Hollywood

State

FL

Zip Code

33019

FEC ID number of contributing federal political committee.

C

Name of Employer

AECOM

Occupation

consultant

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

08 ' 22 ' 2013

Amount of Each Receipt this Period

250.00

VIA ActBlue

Full Name (Last, First, Middle Initial)

B. Mastics George

Mailing Address

131 Seaview Avenue

City

Palm Beach,

State

FL

Zip Code

33480

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

08 ' 22 ' 2013

Amount of Each Receipt this Period

500.00

In-kind office supplies

Full Name (Last, First, Middle Initial)

C. Vecellio Christopher S.

Mailing Address

742 Slope Trail

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing federal political committee.

C

Name of Employer

Vecenergy

Occupation

CEO

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

08 ' 23 ' 2013

Amount of Each Receipt this Period

500.00

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

750.00

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

13031130170

**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 <u>4</u> OF <u>23</u>
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

Full Name (Last, First, Middle Initial) A. Vecellio Leo A. Jr		Date of Receipt M M ' D D ' Y Y Y Y 08 ' 23 ' 2013
Mailing Address 589 N. County Road		Amount of Each Receipt this Period 500.00
City Palm Beach	State Zip Code FL 33480	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CEO Vecellio Group	Occupation CEO	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Leone Kathy H.		Date of Receipt M M ' D D ' Y Y Y Y 08 ' 23 ' 2013
Mailing Address 6602 Marbletree LN.		Amount of Each Receipt this Period 1,000.00
City Lake Worth	State Zip Code FL 33467	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1,000.00
Name of Employer Homemaker	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,000.00	

Full Name (Last, First, Middle Initial) C. Hern Kenneth		Date of Receipt M M ' D D ' Y Y Y Y 08 ' 23 ' 2013
Mailing Address 931 S.W. Jasper Avenue		Amount of Each Receipt this Period 50.00
City Port Saint Lucie,	State Zip Code FL 34953	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Port of Palm Beach	Occupation Director of Security	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	

SUBTOTAL of Receipts This Page (optional).....	1,550.00
TOTAL This Period (last page this line number only).....	

13031130171

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 23					
	<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

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NAME OF COMMITTEE (In Full) Dr. Jean L. Enright for Congress

13031130172

A. Full Name (Last, First, Middle Initial) <u>Sanford Stephen D.</u>		Date of Receipt <u>08 / 27 / 2013</u>
Mailing Address <u>137 Bowsprit Drive</u>		Amount of Each Receipt this Period <u>250.00</u>
City <u>North Palm Beach</u>	State <u>FL</u>	
Zip Code <u>33408</u>		
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer <u>Greenberg Traurig</u>	Occupation <u>Attorney</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>250.00</u>	

B. Full Name (Last, First, Middle Initial) <u>Gang Robert C.</u>		Date of Receipt <u>08 / 27 / 2013</u>
Mailing Address <u>2127 Brickell Avenue</u>		Amount of Each Receipt this Period <u>100.00</u>
City <u>Miami</u>	State <u>FL</u>	
Zip Code <u>33129</u>		
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer <u>Greenberg Traurig</u>	Occupation <u>Attorney</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>100.00</u>	

C. Full Name (Last, First, Middle Initial) <u>DelCastillo Albert A.</u>		Date of Receipt <u>08 / 27 / 2013</u>
Mailing Address <u>7080 Torphin Place</u>		Amount of Each Receipt this Period <u>250.00</u>
City <u>Miami Lakes</u>	State <u>FL</u>	
Zip Code <u>33014</u>		
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer <u>Greenberg Traurig</u>	Occupation <u>Attorney</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>250.00</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>600.00</u>
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 6 OF 23	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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) **Dr. Jean L. Enright for Congress**

Full Name (Last, First, Middle Initial) A. Giles-Klein Bruce H.		Date of Receipt 08 ' 27 ' 2013
Mailing Address 13430 S.W. 69th CT		Amount of Each Receipt this Period 100.00
City Miami	State Zip Code FL 33156	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Greenberg Traurig	Occupation Attorney	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) B. Penneys Sylvia Sohn		Date of Receipt 08 ' 27 ' 2013
Mailing Address 3188 Via Abitare		Amount of Each Receipt this Period 100.00
City Coconut Grove	State Zip Code FL 33133	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Greenberg Traurig	Occupation Attorney	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) c. Bowles Richard C.		Date of Receipt 08 ' 27 ' 2013
Mailing Address 4 Cheviot Court		Amount of Each Receipt this Period 50.00
City Clifton Park	State Zip Code NY 12065	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer State of New York	Occupation Physical	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

13031130173

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

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

FOR LINE NUMBER: PAGE **7** OF **23**
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

A. Full Name (Last, First, Middle Initial)
Gary John W.

Mailing Address
701 US Highway 1

City **North Palm Beach** State **FL** Zip Code **33408**

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

Name of Employer **Law Offices** Occupation **Attorney**
Gary, Dytrych & Ryan

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
1,000.00

1,000.00

B. Full Name (Last, First, Middle Initial)
Smith Joan McInis

Mailing Address
1061 Morse Blvd.

City **Singer Island** State **FL** Zip Code **33404**

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

Name of Employer **Homemaker** Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
500.00

500.00

C. Full Name (Last, First, Middle Initial)
Johnson Phyllis M.

Mailing Address
7341 Eighth Street N.W.

City **Washington, DC** State **DC** Zip Code **20012**

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

Name of Employer **retired** Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
100.00

100.00

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

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

1,600.00

1303113017A

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 23	
	<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) **Dr. Jean L. Enright for Congress**

13031130175

Full Name (Last, First, Middle Initial) A. Bymaster Mark J.		Date of Receipt
Mailing Address 613 3rd Avenue N.		08 / 30 / 2013
City Lake Worth	State FL	Zip Code 33460
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Nowlen, Holt & Miner	Occupation Accountant	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) B. Hendrix Robert Wayne Jr.		Date of Receipt
Mailing Address 13836 Ishnala Circle		08 / 30 / 2013
City Wellington	State FL	Zip Code 33414
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Nowlen, Holt & Miner	Occupation Accountant	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) C. Morton Terry L. Jr.		Date of Receipt
Mailing Address 4127 Chestnut Avenue		08 / 30 / 2013
City Palm Beach Gardens	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Nowlen, Holt & Miner	Occupation Accountant	
Receipt For: <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).....	500.00
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** OF **23**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

A. Full Name (Last, First, Middle Initial)
Bicknell Donald R. Jr.

Mailing Address
701 US Highway 1

City State Zip Code
North Palm Beach FL 33408

FEC ID number of contributing federal political committee.
C

Name of Employer
Law Offices Gary, Dytrych & Ryan

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Holt Edward T.

Mailing Address
4303 Rigels Cove Way

City State Zip Code
Jensen Beach FL 34957

FEC ID number of contributing federal political committee.
C

Name of Employer
Nowlen, Holt & Miner

Occupation
CPA - CEO

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
500.00

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

Mailing Address
8664 Rosalie Court

City State Zip Code
Boynton Beach FL 33472

FEC ID number of contributing federal political committee.
C

Name of Employer
Nowlen, Holt & Miner

Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
200.00

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

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

1,200.00

13031130176

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 23

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

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NAME OF COMMITTEE (In Full)

Dr. Jean L. Enright for Congress

<p>A. Full Name (Last, First, Middle Initial) Stevens Michael</p> <p>Mailing Address P.O. Box 642</p> <p>City Belle Glade State FL Zip Code 33430</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Nowlen, Holt & Miner Occupation Accountant</p> <p>Receipt For: <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 08'30'2013</p> <p>Amount of Each Receipt this Period 200.00</p>
<p>B. Full Name (Last, First, Middle Initial) Sibel Geraldine</p> <p>Mailing Address 1101 Landings Blvd</p> <p>City Greenacres State FL Zip Code 33413</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Nowlen Holt & Miner Occupation Office Administrator</p> <p>Receipt For: <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 08'30'2013</p> <p>Amount of Each Receipt this Period 100,00</p>
<p>C. Full Name (Last, First, Middle Initial) Toro Rudina</p> <p>Mailing Address 3222a Meridian Way North</p> <p>City Palm Beach Gardens State FL Zip Code 33410</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Nowlen, Holt & Miner Occupation Accountant</p> <p>Receipt For: <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 08'30'2013</p> <p>Amount of Each Receipt this Period 100,00</p>
<p>SUBTOTAL of Receipts This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>	<p>400.00</p>

13031130177

**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 OF 23
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

A. Full Name (Last, First, Middle Initial)
Varga Alexia

Mailing Address
165 Lucina Drive

City **Hypoluxo** State **FL** Zip Code **33462**

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

Name of Employer **Nowlen, Holt & Miner** Occupation **Accountant**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200,00

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
200,00

B. Full Name (Last, First, Middle Initial)
Holt Edward T. Jr.

Mailing Address
2445 SE Ranch Acres Circle

City **Jupiter** State **FL** Zip Code **33478**

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

Name of Employer **Nowlen, Holt & Miner** Occupation **Accountant**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200,00

Date of Receipt
08 ' 30 ' 2013

Amount of Each Receipt this Period
200,00

C. Full Name (Last, First, Middle Initial)
Robinson Claudette

Mailing Address
5337 Newport Road

City **Pickens** State **MS** Zip Code **39146**

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

Name of Employer **Homemaker** Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
10,00

Date of Receipt
09 ' 04 ' 2013

Amount of Each Receipt this Period
10,00
Via ActBlue

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

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

410,00

13031130178

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 23

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

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

Full Name (Last, First, Middle Initial) A. Kantor Hal		Date of Receipt 09 ' 13 ' 2013
Mailing Address 715 Via Bella		Amount of Each Receipt this Period , 100.00 Via ActBlue
City Winter Park	State Zip Code FL 32789	
FEC ID number of contributing federal political committee. C		
Name of Employer self	Occupation Attorney	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , 100.00	

Full Name (Last, First, Middle Initial) B. Gelfand Michael		Date of Receipt 09 ' 17 ' 2013
Mailing Address 821 Flamingo Drive		Amount of Each Receipt this Period , 125.00
City West Palm Beach	State Zip Code FL 33401	
FEC ID number of contributing federal political committee. C		
Name of Employer self	Occupation Attorney	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , 125.00	

Full Name (Last, First, Middle Initial) C. AECOM US Federal PAC		Date of Receipt 09 ' 17 ' 2013
Mailing Address 3101 Wilson Blvd. Suite 900		Amount of Each Receipt this Period , 1,000.00
City Arlington	State Zip Code VA 22201	
FEC ID number of contributing federal political committee. C00374447		
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , 1,000.00	

SUBTOTAL of Receipts This Page (optional).....	, 1,225.00
TOTAL This Period (last page this line number only).....	, , ,

13031130179

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

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

FOR LINE NUMBER: PAGE **13** OF **23**

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

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

0810011001

<p>A. Full Name (Last, First, Middle Initial) Zielinski Paul</p> <p>Mailing Address 8176 Desmond Drive</p> <p>City Boynton Beach State FL Zip Code 33472</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Port of Palm Beach Occupation CFO</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date : : 50,00</p>	<p>Date of Receipt 09 ' 05 ' 2013</p> <hr/> <p>Amount of Each Receipt this Period : : 50,00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Harakas Annette</p> <p>Mailing Address 6090 Glentree Lane</p> <p>City Lake Worth State FL Zip Code 33463</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Port of Palm Beach Occupation Deputy Clerk</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date : : 25,00</p>	<p>Date of Receipt 09 ' 05 ' 2013</p> <hr/> <p>Amount of Each Receipt this Period : : 25,00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Machado Jackelin</p> <p>Mailing Address 806 8th Court</p> <p>City Palm Beach Gardens, FL State FL Zip Code 33410</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Port of Palm Beach Occupation Assistant Deputy Clerk</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date : : 25,00</p>	<p>Date of Receipt 09 ' 09 ' 2013</p> <hr/> <p>Amount of Each Receipt this Period : : 25,00</p>
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<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>: : 100,00</p>
<p>TOTAL This Period (last page this line number only).....</p>	<p>: : .</p>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 14 OF 23**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

181011301

<p>A. Full Name (Last, First, Middle Initial) Portor Valette S.</p> <p>Mailing Address 10694 Cypress Bend Drive</p> <p>City Boca Raton State FL Zip Code 33498</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Homemaker Occupation</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date</p>	<p>Date of Receipt 09 ' 12 ' 2013</p> <p>Amount of Each Receipt this Period 50.00</p>
<p>B. Full Name (Last, First, Middle Initial) Beaudet Bevin A.</p> <p>Mailing Address 316 Plymouth Road</p> <p>City West Palm Beach State FL Zip Code 33405</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer PBC Water Utilities Occupation Director</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date</p>	<p>Date of Receipt 09 ' 12 ' 2013</p> <p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Miller Anthony J.</p> <p>Mailing Address 277 Royal Poinciana Way</p> <p>City Palm Beach State FL Zip Code 33480</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Palm Beach Maritime Occupation Director Special Events</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date</p>	<p>Date of Receipt 09 ' 12 ' 2013</p> <p>Amount of Each Receipt this Period 400.00</p>
<p>SUBTOTAL of Receipts This Page (optional).....</p>	
<p>TOTAL This Period (last page this line number only).....</p>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 23

<input 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) **Dr. Jean L. Enright for Congress**

A. Full Name (Last, First, Middle Initial)
Almira Jean Marie

Mailing Address
1408 S.E. Colony Way

City **Jupiter** State **FL** Zip Code **33478**

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

Name of Employer **self** Occupation **accountant**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200,00

Date of Receipt
09 / 17 / 2013

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Freeman Alexander

Mailing Address
1251 Rosegate Blvd

City **Riviera Beach** State **FL** Zip Code **33404**

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

Name of Employer **City of Riviera Beach, FL** Occupation **police officer**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
200,00

Date of Receipt
09 / 17 / 2013

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Buckman Emmy H.

Mailing Address
1121 Singer Drive

City **Riviera Beach** State **FL** Zip Code **33404**

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

Name of Employer **self - Illustrated Properties** Occupation **Realtor**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
100,00

Date of Receipt
09 / 17 / 2013

Amount of Each Receipt this Period
100.00

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

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

500.00

13031130182

**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)

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

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

3810511031

Full Name (Last, First, Middle Initial) A. Kranich Janet T.		Date of Receipt 09 17 2013
Mailing Address 1070 Singer Drive		Amount of Each Receipt this Period 50.00
City Riviera Beach	State FL	
Zip Code 33404		Amount of Each Receipt this Period 1,000.00
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation retired	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	
Full Name (Last, First, Middle Initial) B. Thomas Jane E.		Date of Receipt 09 20 2013
Mailing Address 1309 Woodlawn Avenue		Amount of Each Receipt this Period 1,000.00
City Wilmington	State DE	
Zip Code 19806		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Port Contractors	Occupation Owner	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1,000.00	
Full Name (Last, First, Middle Initial) c. Mostkoff Benjamin J.		Date of Receipt 09 20 2013
Mailing Address 4900 Lakeview Drive		Amount of Each Receipt this Period 500.00
City Miami Beach	State FL	
Zip Code 33140		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Shoreline	Occupation Project Manager	Amount of Each Receipt this Period 500.00
Receipt For: <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).....		1,550.00
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 17 OF 23

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

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NAME OF COMMITTEE (In Full)

Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)

A. Burr David W.

Mailing Address

761 Dressler Lane

City

Rochester Hills

State

MI

Zip Code

48307

FEC ID number of contributing federal political committee.

C

Name of Employer

Rich & Associates

Occupation

Planner
Project Manager

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 200.00

Date of Receipt

09 24 2013

Amount of Each Receipt this Period

, 200.00

Full Name (Last, First, Middle Initial)

B. Royo Carmen Linda

Mailing Address

1316 N.W. 127th Drive

City

Sunrise

State

FL

Zip Code

33323

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 500.00

Date of Receipt

09 24 2013

Amount of Each Receipt this Period

, 500.00

Full Name (Last, First, Middle Initial)

C. McGee Christine M.

Mailing Address

11050 S.W. 23rd Street

City

Davie

State

FL

Zip Code

33324

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 500.00

Date of Receipt

09 24 2013

Amount of Each Receipt this Period

, 500.00

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

1,200.00

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

13031130184

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

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

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) Dr. Jean L. Enright for Congress

58101130185

A. Full Name (Last, First, Middle Initial) Grand Robert M.
 Mailing Address 7930 Parsons Pine Drive
 City Boynton Beach State FL Zip Code 33437
 Date of Receipt 09 / 24 / 2013
 FEC ID number of contributing federal political committee. C
 Amount of Each Receipt this Period , 100.00
 Name of Employer Wells Fargo Insurance Occupation Account Manager
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date , 100.00

B. Full Name (Last, First, Middle Initial) Mock David
 Mailing Address 212 Atlantic Drive S.E.
 City Lantana State FL Zip Code 33462
 Date of Receipt 09 / 25 / 2013
 FEC ID number of contributing federal political committee. C
 Amount of Each Receipt this Period , 500.00
 Name of Employer CH2M Hill Occupation Engineer
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date , 500.00
VIA ActBlue

C. Full Name (Last, First, Middle Initial) Freeman Corinne J.
 Mailing Address 12 N.E. 111 Street
 City Miami Shores State FL Zip Code 33161
 Date of Receipt 09 / 25 / 2013
 FEC ID number of contributing federal political committee. C
 Amount of Each Receipt this Period , 100.00
 Name of Employer NONE Occupation Retired
 Receipt For: Primary General
 Other (specify) Election Cycle-to-Date , 100.00

SUBTOTAL of Receipts This Page (optional)..... 700.00
 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 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

91051130186

A. Full Name (Last, First, Middle Initial) **Mastics George**
 Mailing Address **131 Seaview Avenue**
 City **Palm Beach** State **FL** Zip Code **33019**
 Date of Receipt **09 25 2013**
 Amount of Each Receipt this Period **400.00**
 Name of Employer **Retired** Occupation
 Receipt For: Primary General Other (specify)
 Election Cycle-to-Date **400.00**
In Kind

B. Full Name (Last, First, Middle Initial) **Santamaria Jess R.**
 Mailing Address **255 Ponderosa Court**
 City **Royal Palm Beach** State **FL** Zip Code **33411**
 Date of Receipt **09 26 2013**
 Amount of Each Receipt this Period **1,000.00**
 Name of Employer **Palm Beach County** Occupation **County Commissioner**
 Receipt For: Primary General Other (specify)
 Election Cycle-to-Date **1,000.00**

C. Full Name (Last, First, Middle Initial) **Pete Virgilie Arceneaux**
 Mailing Address **7806 Fernleaf Drive**
 City **Orlando** State **FL** Zip Code **32836**
 Date of Receipt **09 26 2013**
 Amount of Each Receipt this Period **250.00**
 Name of Employer **NONE** Occupation **Retired**
 Receipt For: Primary General Other (specify)
 Election Cycle-to-Date **250.00**

SUBTOTAL of Receipts This Page (optional) **1,250.00**
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 20 OF 23
	<input 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) Dr. Jean L. Enright for Congress

13031130187

Full Name (Last, First, Middle Initial) A. <u>Otokiti Linnetta</u>		Date of Receipt <u>09 26 2013</u>
Mailing Address <u>7806 Fernleaf Drive</u>		Amount of Each Receipt this Period <u>250.00</u>
City <u>Orlando</u>	State Zip Code <u>FL 32836</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>250.00</u>
Name of Employer <u>NONE</u>	Occupation <u>Retired</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>250.00</u>	

Full Name (Last, First, Middle Initial) B. <u>Martin Gene</u>		Date of Receipt <u>09 27 2013</u>
Mailing Address <u>5983 Patio Drive</u>		Amount of Each Receipt this Period <u>150.00</u> <u>Via ActBlue</u>
City <u>Boca Raton</u>	State Zip Code <u>FL 33433</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>150.00</u>
Name of Employer <u>Self</u>	Occupation <u>GWM Marine</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>150.00</u>	

Full Name (Last, First, Middle Initial) C. <u>Szabo Craig</u>		Date of Receipt <u>09 27 2013</u>
Mailing Address <u>22249 Dardenne Street</u>		Amount of Each Receipt this Period <u>2,600.00</u> <u>VIA ActBlue</u>
City <u>Calabasas</u>	State Zip Code <u>CA 91302</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>2,600.00</u>
Name of Employer <u>Self</u>	Occupation <u>CPA Business Manager</u>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <u>2,600.00</u>	

SUBTOTAL of Receipts This Page (optional).....	<u>3,000.00</u>
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)

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

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NAME OF COMMITTEE (In Full)

Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)

A. Weinroth Robert

Mailing Address

951 BRKN SND PKWY N.W.

City State Zip Code

Boca Raton FL 33433

FEC ID number of contributing federal political committee.

C

Name of Employer

FREEDOMED

Occupation

Attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 250.00

Date of Receipt

09 29 2013

Amount of Each Receipt this Period

, 250.00

Via ActBlue

Full Name (Last, First, Middle Initial)

B. Sheffield Nadine B

Mailing Address

700 South Mangonia Circle

City State Zip Code

West Palm Beach FL 33401

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

Retired

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 350.00

Date of Receipt

09 30 2013

Amount of Each Receipt this Period

, 350.00

Full Name (Last, First, Middle Initial)

C. Otokiti Charles I

Mailing Address

7717 Pineapple Drive

City State Zip Code

Orlando FL 32835

FEC ID number of contributing federal political committee.

C

Name of Employer

PSA Constructors

Occupation

engineer

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 250.00

Date of Receipt

09 30 2013

Amount of Each Receipt this Period

, 250.00

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

, 850.00

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

8910ET1301

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 23

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

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

681091130189

Full Name (Last, First, Middle Initial) A. Hassall Christopher		Date of Receipt 09 / 30 / 2013
Mailing Address 7063 Phillips Cove Court		Amount of Each Receipt this Period ,250.00 Via ActBlue
City Orlando	State Zip Code FL 32819	
FEC ID number of contributing federal political committee. C		
Name of Employer PSA Contractors	Occupation Project Manager	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date ,250.00	

Full Name (Last, First, Middle Initial) B. Gadson Timothy		Date of Receipt 09 / 30 / 2013
Mailing Address 6474 Willoughby Circle		Amount of Each Receipt this Period ,100.00 Via ActBlue
City Lake Worth	State Zip Code FL 33463	
FEC ID number of contributing federal political committee. C		
Name of Employer National Academic Ed. Partners	Occupation Chief Transformation Officer	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date ,100.00	

Full Name (Last, First, Middle Initial) c. Ward Gerald		Date of Receipt 09 / 30 / 2013
Mailing Address P.O. Box 10441		Amount of Each Receipt this Period ,100.00 Via ActBlue
City Florida City	State Zip Code FL 33419	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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 **23** OF **23**

(check only one)

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

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NAME OF COMMITTEE (In Full) **Dr. Jean L. Enright for Congress**

A. Together We Stand Democratic Club

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

Date of Receipt
Amount of Each Receipt this Period

P.O. Box 8406
West Palm Beach FL 33407
C
500.00
09/30/2013
500.00

B. Torcivia Glen J.

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

Date of Receipt
Amount of Each Receipt this Period

701 Northpoint Pkwy
West Palm Beach FL 33407
C
self Attorney
100.00
09/30/2013
100.00

C.

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

Date of Receipt
Amount of Each Receipt this Period

M M / D D / Y Y Y Y
C

SUBTOTAL of Receipts This Page (optional) **600.00**

TOTAL This Period (last page this line number only)

061051130190

**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 1 OF 5

<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)

Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. ActBlue Technical Services

08 ' 18 ' 2013

Mailing Address

P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

Amount of Each Disbursement this Period

7.12

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: FL

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Mastics George

08 ' 22 ' 2013

Mailing Address

131 Seaview Avenue

City

Palm Beach, FL

State

FL

Zip Code

33480

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

In Kind: Office Supplies

Candidate Name

Category/
Type

In kind

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: FL

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Goodway Printing & Copy Center

08 ' 23 ' 2013

Mailing Address

101 East Blue Heron Blvd.

City

Riviera Beach

State

FL

Zip Code

33404

Amount of Each Disbursement this Period

127.20

Purpose of Disbursement

Copies of Flyers

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: FL

District:

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

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

1610115031

**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 2 OF 5	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. ActBlue Technical Services		08 25 2013
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 9.88
City Cambridge	State MA Zip Code 02238-2110	
Purpose of Disbursement Service fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ActBlue Technical Services		09 08 2013
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period .40
City Cambridge	State MA Zip Code 02238-2110	
Purpose of Disbursement Service fee		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Go Daddy Web Order		09 09 2013
Mailing Address Web page order		Amount of Each Disbursement this Period 14.99
City Go Daddy, Com	State Zip Code	
Purpose of Disbursement web page payment		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District:		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2610215051

**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 **3** OF **5**

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)

c. Moo Inc.

Mailing Address

985 Waterman Avenue

City

State

Zip Code

East Providence RI 02914

Purpose of Disbursement

Business cards & designs

Candidate Name

Dr. Jean L. Enright for Congress

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **FL**

District:

Date of Disbursement

09 10 2013

Amount of Each Disbursement this Period

209.70

Full Name (Last, First, Middle Initial)

A. Greater Pompano Beach Democratic Club

Mailing Address

P.O. Box 5690

City

State

Zip Code

Pompano Beach, FL 33140

Purpose of Disbursement

Ad

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **FL**

District:

Date of Disbursement

09 13 2013

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address

P.O. Box 382110

City

State

Zip Code

Cambridge MA 02238-2110

Purpose of Disbursement

Service fee

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **FL**

District:

Date of Disbursement

09 15 2013

Amount of Each Disbursement this Period

4.94

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

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

13031130193

**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 4 OF 5

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

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NAME OF COMMITTEE (In Full)

Dr. Jean L. Enright for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

c. Moo Inc

09 ' 17 ' 2013

Mailing Address

985 Waterman Avenue

City

State

Zip Code

East Providence RI 02914

Amount of Each Disbursement this Period

36.74

Purpose of Disbursement

Business cards - design

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: FL

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Mastics George

09 ' 25 ' 2013

Mailing Address

131 Seaview Avenue

City

State

Zip Code

Palm Beach FL 33480

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement

In Kind: Ad

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: FL

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

c. Act Blue Technical Services

09 ' 30 ' 2013

Mailing Address

P.O. Box 382110

City

State

Zip Code

Cambridge MA

Amount of Each Disbursement this Period

156.04

Purpose of Disbursement

service fee

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: FL

District:

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

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

1301130194

**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 5 OF 5

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

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NAME OF COMMITTEE (in Full)

A. Full Name (Last, First, Middle Initial) Wells Fargo Bank Date of Disbursement 09 ' 30 ' 2013

Mailing Address 1100 East Blue Heron Blvd.

City Riviera Beach State FL Zip Code 33404 Amount of Each Disbursement this Period 5.00

Purpose of Disbursement Bank service fee Category/Type

Candidate Name

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

State: FL District:

B. Full Name (Last, First, Middle Initial) Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

C. Full Name (Last, First, Middle Initial) Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

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

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

13031130195

CALL SENDER

13031130195

FedEx carbon-neutral envelope shipping

FEDERAL ELECTION COMMISSION
999 E ST NW

WASHINGTON DC 20463
(215) 287-3418
REF: PO1

Express

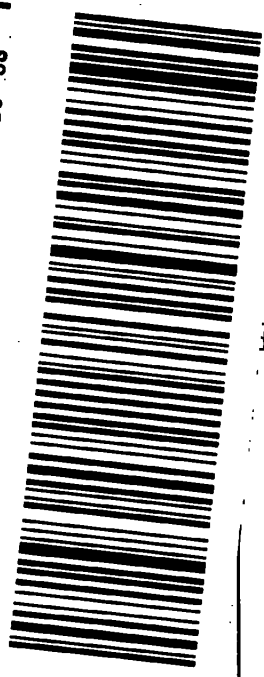


DEPT:



TUE - 15 OCT AA
STANDARD OVERNIGHT

TRK# 8037 1711 0010
XC RDVA
20463
DC-US IAD



RT 677 6
FZ

0010
10.15

FedEx NEW Package
Express US Airbill

1 From
Date 10/14/2013
Sender's Name Dr. Jean L. Enright
Company for Congress
Address P.O. Box 30232
City Palm Beach Gardens State FL ZIP 33420

2 Your Internal Billing Reference
3 To Recipient's Name
Company Federal Election Commission
Address 999 E Street N.W.
City Washington, D.C State ZIP 20463

4 Express Package Service Form ID No. 0200
NOTE: Service order has changed. Please adjust label.
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight
FedEx Signature Overnight

5 Packaging
FedEx Envelope
FedEx Pak
FedEx Tube
Other
6 Special Handling and Delivery Signature Options
SATURDAY Delivery
No Signature Required
Direct Signature
Indirect Signature
7 Payment Bill for
Sender's Account
Recip. ID No. 101010010
Total Packages Total Weight

8
9
677
6
644



and stick airbill here.

fedex.com 1.800.GoFedEx 1.800.463.3339

fedex.com 1.800.GoFedEx

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

13031130197

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Exp</i>	Shipping Date <i>10/14/13</i>
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JMP</i> PREPARER	<i>10/18/13</i> DATE PREPARED

(8/2013)