

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Frederica S. Wilson for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	88515.00	288120.00
(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)).....	88515.00	288120.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	47164.98	164839.66
(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)).....	47164.98	164839.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	199340.72	
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).....	15906.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Frederica S. Wilson for Congress

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

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).....	49450.00	65675.00
(ii) Unitemized.....	565.00	6945.00
(iii) TOTAL of contributions from individuals ▶	50015.00	72620.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	38500.00	215500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	88515.00	288120.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	88515.00	288120.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	47164.98	164839.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	6850.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	47164.98	171689.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	157990.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	88515.00
25. SUBTOTAL (add Line 23 and Line 24).....	246505.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	47164.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	199340.72

**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 42
	<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	

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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Herickson Accime

Mailing Address 601 NE 36 Street
Apt 1510

City Miami State FL Zip Code 33137

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

Name of Employer New Urban Works Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : C8755626

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Herickson Accime

Mailing Address 601 NE 36 Street
Apt 1510

City Miami State FL Zip Code 33137

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

Name of Employer New Urban Works Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : C8755627

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Paul Brathwaite

Mailing Address 13102 Jordans Endeavor Dr

City Bowie State MD Zip Code 20720-3393

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C8772248

Amount of Each Receipt this Period
1000.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Andrew Burnes

Mailing Address 22 Jordan Rd.

City South Dartmouth State MA Zip Code 02748

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

Name of Employer HallKeen Occupation President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750429

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Romelito Charles

Mailing Address 13770 NE 3rd Ct

City Miami State FL Zip Code 33161

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

Name of Employer Cowein Marketing Group, LLC Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : C8843202

Amount of Each Receipt this Period
 1600.00

C. Full Name (Last, First, Middle Initial)
Michael DiBenedetto

Mailing Address 7519 NW 114th Ct.

City Miami State FL Zip Code 33178

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

Name of Employer South Florida Educational Federal Cred Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : C8772266

Amount of Each Receipt this Period
 250.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Talmadge Fair

Mailing Address 880 NE 69th ST
APT 8I

City State Zip Code
miam FL 33138

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

Name of Employer Occupation
Urban League Social Worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 11 / 2014

Transaction ID : C8653838

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 9945

City State Zip Code
McLean VA 22102-0945

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

Name of Employer Occupation
Gephardt Government Affairs President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : C8855888

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Oliver Gross

Mailing Address 18151 NE 31st Ct

City State Zip Code
Aventura FL 33160-2660

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

Name of Employer Occupation
New Urban Development, LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : C8750631

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Mark Hess

Mailing Address 1400 Providence Highway
Suite 1000

City Norwood State MA Zip Code 02062

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

Name of Employer HallKeen Management Occupation VP of Acquisition & Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653836

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ellis Houston

Mailing Address 5804 Oporto Madrid Blvd. S

City Birmingham State AL Zip Code 35210

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

Name of Employer Greater Birmingham Transportation Serv Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653855

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Edison O. Jackson

Mailing Address 231 Riverside Dr.
Unit 401

City Holly Hill State FL Zip Code 32117

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

Name of Employer Bethune-Cookman University Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653852

Amount of Each Receipt this Period
1000.00

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

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

2250.00

**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 42
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Cyrus Jollivette

Mailing Address 11800 Old Georgetown Rd
Apt 1221

City North Bethesda State MD Zip Code 20852-2647

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782494

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Renee Jones

Mailing Address 1892 N.W. 112 St.

City Miami State FL Zip Code 33167

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653842

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Nerlande Joseph

Mailing Address 13805 NW 5 Ave.

City Miami State FL Zip Code 33162

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

Name of Employer Real Living First Service Realty Inc Occupation Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750433

Amount of Each Receipt this Period
2600.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Nerlande Joseph

Mailing Address 13805 NW 5 Ave.

City Miami	State FL	Zip Code 33162
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FEC ID number of contributing federal political committee. **C**

Name of Employer Real Living First Service Realty Inc	Occupation Real Estate Broker
--	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750434

Amount of Each Receipt this Period
2400.00

B. Full Name (Last, First, Middle Initial)
Steven Klein

Mailing Address 7127 Via Marbella

City Boca Raton	State FL	Zip Code 33433-1042
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Consultant
--------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750629

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Alfred Liggins

Mailing Address 1010 Wayne Ave

City Silver Spring	State MD	Zip Code 20910-5600
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FEC ID number of contributing federal political committee. **C**

Name of Employer Radio One	Occupation President
-------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2014

Transaction ID : C8861492

Amount of Each Receipt this Period
500.00

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

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

4900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Willie Logan

Mailing Address 18870 NW 53rd Place

City Opa Locka	State FL	Zip Code 33055
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of Florida	Occupation Representative
--------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653833

Amount of Each Receipt this Period
650.00

B. Full Name (Last, First, Middle Initial)
Joseph Louisias

Mailing Address 801 NE 96th Street

City Miami	State FL	Zip Code 33138
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FEC ID number of contributing federal political committee. **C**

Name of Employer Rockers Island Entertainment	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782408

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Joseph Louisias

Mailing Address 801 NE 96th Street

City Miami	State FL	Zip Code 33138
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FEC ID number of contributing federal political committee. **C**

Name of Employer Rockers Island Entertainment	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782412

Amount of Each Receipt this Period
400.00

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

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

3650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Mike McKay

Mailing Address 1000 Connecticut Ave NW
9th Fl

City Washington State DC Zip Code 20036

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

Name of Employer Empire Consulting Group Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653831

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Rudolph Moise

Mailing Address 12947 Equestrian Trail

City Davie State FL Zip Code 33330

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653846

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Rudolph Moise

Mailing Address 12947 Equestrian Trail

City Davie State FL Zip Code 33330

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653848

Amount of Each Receipt this Period
400.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 42
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Eric Mondres		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 15082 Stillfield Place		Transaction ID : C8782496	
City Centreville	State VA	Zip Code 20120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer FHLBank Atlanta	Occupation Senior VP, Government Industry Relatio		
Receipt For: 2014 <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. Annie Neasman		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2014	
Mailing Address 6799 Brookline Dr		Transaction ID : C8653858	
City Hialeah	State FL	Zip Code 33015-2441	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Jessie Trice Community Health Center	Occupation President and CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) C. Daryl Parks		Date of Receipt M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 240 N Magnolia Dr		Transaction ID : C8772237	
City Tallahassee	State FL	Zip Code 32301-2638	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Parks and Crump LLC	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 42
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Hemant Patel

Mailing Address 7150 Biscayne Blvd

City Miami State FL Zip Code 33138-5702

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

Name of Employer King Motel Occupation Self-Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750614

Amount of Each Receipt this Period
 _____ 2600.00

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

Mailing Address 7150 Biscayne Blvd

City Miami State FL Zip Code 33138-5702

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

Name of Employer King Motel Occupation Self-Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750631

Amount of Each Receipt this Period
 _____ 400.00

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

Mailing Address 1221 Brickell Ave.
9th Floor

City Miami State FL Zip Code 33131

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

Name of Employer Phillips CI, LLC Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750427

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Laurinus Pierre

Mailing Address 8260 NE 2nd Ave

City Miami State FL Zip Code 33138-3808

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

Name of Employer GMHETC Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653839

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Rajroop Ramkhelawan

Mailing Address 15830 NW 16th Ct.

City Hollywood State FL Zip Code 33028

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

Name of Employer Ross University School of Medicine Occupation Director of Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653840

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Garrett Roberts

Mailing Address 891 NW 213th Terrace #107

City Miami State FL Zip Code 33169

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : C8844534

Amount of Each Receipt this Period
 2600.00

Amount of Each Receipt this Period
 5000.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Garrett Roberts

Mailing Address 891 NW 213th Terrace #107

City Miami State FL Zip Code 33169

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : C8844535

Amount of Each Receipt this Period
2400.00

B. Full Name (Last, First, Middle Initial)
Steven C. Rodger

Mailing Address 623 Lake Ave.

City Greenwich State CT Zip Code 06830

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

Name of Employer Information Requested Occupation Information Requested

Equinox Capitol Founder and Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8887636

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Marilyn Thompson

Mailing Address 236 Westwood Rd

City Annapolis State MD Zip Code 21401-1251

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

Name of Employer Information Requested Occupation Information Requested

MWW Group Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C8858811

Amount of Each Receipt this Period
600.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Marilyn Thompson

Mailing Address 236 Westwood Rd

City State Zip Code
Annapolis MD 21401-1251

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

Name of Employer Occupation
MWW Group Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : C8883511

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Wanda Townsend

Mailing Address 5527 Tinkers Creek Pl.

City State Zip Code
Clinton MD 20735

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

Name of Employer Occupation
National Cable & Telecommunications As Vice President, Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782493

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Anthony Velazquez

Mailing Address 442 NE 25th

City State Zip Code
Miami FL 33137

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653850

Amount of Each Receipt this Period
500.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Monique Weaver

Mailing Address 13543 SW 49 Ct.

City Miramar State FL Zip Code 33027

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

Name of Employer Information Requested Occupation Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750431

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Monique Weaver

Mailing Address 13543 SW 49 Ct.

City Miramar State FL Zip Code 33027

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

Name of Employer Information Requested Occupation Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : C8750432

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Millan Law Group LLC

Mailing Address 9155 S Dadeland Blvd.
Suite 1412

City Miami State FL Zip Code 33156

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

Name of Employer Information Requested Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653879

Amount of Each Receipt this Period
1000.00

LLC - Members below if itemized. Permissible funds.

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 42
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Stephen Millan

Mailing Address 9155 S Dadeland Blvd
St 1412

City Miami State FL Zip Code 33156

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

Name of Employer Millan Law Group Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8885985

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

49450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : C8843204

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 7th Street, NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014

Transaction ID : C8843198

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : C8653805

Amount of Each Receipt this Period
 2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 11 / 2014

Transaction ID : C8653806

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
ASSOCIATION OF PROGRESSIVE RENTAL ORGANIZATIONS POLITICAL ACTION COMMITTEE

Mailing Address 1504 ROBIN HOOD TRAIL

City State Zip Code
AUSTIN TX 78703

FEC ID number of contributing federal political committee. **C C00166223**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C8782503

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
AT&T Federal PAC

Mailing Address 208 S. Akard St.
Ste. 3521

City State Zip Code
Dallas TX 75202

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : C8843203

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

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

Mailing Address 1701 JFK Blvd.

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8887632

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET, NW SUITE 300

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8887630

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE, NW, STE 560

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8887634

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. CUMMINS INC. POLITICAL ACTION COMMITTEE (CIPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 PENNSYLVANIA AVENUE, NW
 NORTH BUILDING, SUITE 625
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C C00377952**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 23 / 2014
Transaction ID : C8843201
 Amount of Each Receipt this Period
 500.00

B. D.R.I.V.E. DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATIONAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 LOUISIANA AVE., NW
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C C00032979**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014
Transaction ID : C8888314
 Amount of Each Receipt this Period
 5000.00

C. Dade County Fire Fighters Local 1403 PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 NW 21 Street
 Suite 222
 City Miami State FL Zip Code 33122
 FEC ID number of contributing federal political committee. **C C00130187**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014
Transaction ID : C8653870
 Amount of Each Receipt this Period
 1000.00

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Florida Sugar Cane League PAC

Mailing Address 1301 Pennsylvania Ave NW
Ste 401

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00012328**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782497

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)

Mailing Address 6700 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C C00034132**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8887651

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8887643

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address P.O. BOX 75000
MC2250

City State Zip Code
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782308

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE

Mailing Address 2600 SOUTH EUCLID AVENUE

City State Zip Code
BAY CITY MI 48706

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : C8782486

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : C8883738

Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional).....	6500.00
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 26 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 11 / 2014

Transaction ID : C8653872

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
REGIONS BANK SHAREHOLDERS SUPER PAC

Mailing Address 1015 15TH STREET NW
SUITE 920

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00432252

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : C8852339

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Sugar Cane Growers Cooperative of Florida PAC

Mailing Address PO Box 666

City State Zip Code
Belle Glade FL 33430

FEC ID number of contributing federal political committee. **C** C00254656

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : C8887654

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 42
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Mailing Address **P.O. BOX 22945**

City **HIALEAH** State **FL** Zip Code **33002**

FEC ID number of contributing federal political committee. **C C00387720**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	11	/	2014

Transaction ID : C8653809

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address **55 GLENLAKE PARKWAY NE**

City **ATLANTA** State **GA** Zip Code **30328**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	11	/	2014

Transaction ID : C8653797

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Wal-Mart Stores, Inc. PAC for Responsible Governmen

Mailing Address **702 SW 8 Street**

City **Bentonville** State **AR** Zip Code **72716**

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2014

Transaction ID : C8883740

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

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

Mailing Address 104 WILMOT ROAD MS #1447

City DEERFIELD State IL Zip Code 60015

FEC ID number of contributing federal political committee. **C** C00160770

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : C8843199

Amount of Each Receipt this Period
 1000.00

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

38500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 3338.27
City Washington State DC Zip Code 20003	Category/Type	
Purpose of Disbursement Consulting - Fundraising and Compliance		Transaction ID : D563818
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 88.83
City Washington State DC Zip Code 20003	Category/Type	
Purpose of Disbursement Campaign Phone and Mailing Expenses		Transaction ID : D563819
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4500.00
City Washington State DC Zip Code 20003	Category/Type	
Purpose of Disbursement Consulting - Fundraising and Compliance		Transaction ID : D563822
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7927.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 57.02 Transaction ID : D563823
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Phone, Mailing and Transportation Expenses	
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. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 12.09 Transaction ID : D563827
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Office Supplies Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4500.00 Transaction ID : D568022
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting - Fundraising and Compliance	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4569.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4,500.00 Transaction ID : D568024
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Phone and Mailing Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 24.53 Transaction ID : D568031
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Office Supplies and Transportation	
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) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4,683.54 Transaction ID : D569498
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting - Fundraising and Compliance	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4683.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 314.57 Transaction ID : D569499
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Phone and Mailing Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Express EMPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 39.95 Transaction ID : D568507
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Merchant Services	
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) C. Express EMPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 102.45 Transaction ID : D568508
City Hagerstown State MD Zip Code 21740	Purpose of Disbursement Merchant Services	
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:		

SUBTOTAL of Disbursements This Page (optional).....	314.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Express EMPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 73.87
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services	Transaction ID : D568510
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. Express EMPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 74.50
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Services	Transaction ID : D569495
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) c. Florida Department of State		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address PO Box 6198		Amount of Each Disbursement this Period 10440.00
City Tallahassee	State FL	
Zip Code 32314	Purpose of Disbursement Qualifying Fee	Transaction ID : D563817
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:		

SUBTOTAL of Disbursements This Page (optional).....	10588.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. NGP Software, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 1225 I St NW Ste 1225		Amount of Each Disbursement this Period 2100.00 Transaction ID : D563816
City Washington State DC Zip Code 20005-5918	Purpose of Disbursement Database Software	
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. Runyan Holdings, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 8 E Street, SE		Amount of Each Disbursement this Period 250.00 Transaction ID : D569497
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Event Space Rental Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 149.71 Transaction ID : D563820
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Food and Beverage Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2499.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 42			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Johnny's Half Shell			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 400 North Capitol Street, N.W.			Amount of Each Disbursement this Period 100.00
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Campaign Food and Beverage Expense		Category/ Type	Transaction ID : D563821 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422			Amount of Each Disbursement this Period 5325.00
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Campaign Food, Beverage and Ticket Expense		Category/ Type	Transaction ID : D563824
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Johnny's Half Shell			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 400 North Capitol Street, N.W.			Amount of Each Disbursement this Period 680.00
City Washington	State DC	Zip Code 20001	
Purpose of Disbursement Campaign Food and Beverage Expense		Category/ Type	Transaction ID : D563830 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	5325.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 42	
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. The Miami Heat		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 601 Biscayne Blvd		Amount of Each Disbursement this Period 4645.00
City Miami	State FL	
Zip Code 33132	Purpose of Disbursement Campaign Event Tickets	Transaction ID : D563832
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 70.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Florida Dept. of State Filing Fee	Transaction ID : D563825
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Florida Department of State		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO Box 6198		Amount of Each Disbursement this Period 70.00
City Tallahassee	State FL	
Zip Code 32314	Purpose of Disbursement Filing Fee	Transaction ID : D563829
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 42	
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Kemet Group Holdings, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 101 Ocean Drive Suite 717		Amount of Each Disbursement this Period 6650.00 Transaction ID : D568037
City Miami Beach	State FL Zip Code 33139	
Purpose of Disbursement Campaign Event Tickets	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines Arena		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 601 Biscayne Boulevard		Amount of Each Disbursement this Period 6650.00 Transaction ID : D568044 [MEMO ITEM]
City Miami	State FL Zip Code 33132	
Purpose of Disbursement Campaign Event Tickets	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kemet Group Holdings, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 101 Ocean Drive Suite 717		Amount of Each Disbursement this Period 4537.58 Transaction ID : D568046
City Miami Beach	State FL Zip Code 33139	
Purpose of Disbursement Campaign Food and Beverage Expense	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11187.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 42	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. American Airlines Arena		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 601 Biscayne Boulevard		Amount of Each Disbursement this Period 4537.58
City Miami State FL Zip Code 33132	Category/Type	
Purpose of Disbursement Campaign Food and Beverage Expense		Transaction ID : D568045 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Category/Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Category/Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	47164.98

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Frederica S. Wilson for Congress** Transaction ID : **L390**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Ms. Frederica S Wilson PERS FUNDS** *[PERSONAL FUNDS]* Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
1018 NW 204 St

City State ZIP Code
Miami FL 33169

Original Amount of Loan 250.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250.00
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TERMS

Date Incurred: M 03 / D 13 / Y 2009 Date Due: M / D / No due date Interest Rate: None % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 250.00

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L575

Frederica S. Wilson for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Ms. Frederica S Wilson PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address
1018 NW 204 St

City State ZIP Code
Miami FL 33169

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4500.00 0.00 4500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

30

2009

No Due Date

None

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 4500.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Frederica S. Wilson for Congress** Transaction ID : L579

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2010
Ms. Frederica S Wilson PERS FUNDS Primary
 Mailing Address 1018 NW 204 St General Other (specify) ▼

City State ZIP Code
 Miami FL 33169

Original Amount of Loan 50000.00	Cumulative Payment To Date 39500.00	Balance Outstanding at Close of This Period 10500.00
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TERMS

Date Incurred M M / D D / Y Y Y Y 08 / 20 / 2010	Date Due M M / D D / Y Y Y Y None	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="10500.00"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="15250.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 42 OF 42
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Development Group	Nature of Debt (Purpose): Event Food and Beverage Expense
Mailing Address 499 South Capitol St SW Ste 422	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period <input type="text" value="656.00"/>	Transaction ID : D534939	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="656.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="656.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="656.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="15250.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="15906.00"/>