

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

A Bright Future

ADDRESS (number and street)

975 6th Avenue South

Ste. 200

☐ Check if different  
than previously  
reported. (ACC)

Naples

FL

34102

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00560367

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☒ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

03

2014

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

05

15

2014

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 Michael Price

Signature of Treasurer

Michael Price

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

05

2014

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 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

A Bright Future

Report Covering the Period: From: M M / D D / Y Y Y Y Y 04 / 03 / 2014 To: M M / D D / Y Y Y Y Y 05 / 15 / 2014

|  | COLUMN A<br>This Period   | COLUMN B<br>Calendar Year-to-Date                                     |
|--|---|---|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014     |   | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |
| (c) Total Receipts (from Line 19) .....  | <span style="border: 1px solid black; padding: 2px;">109980.00</span> | <span style="border: 1px solid black; padding: 2px;">109980.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <span style="border: 1px solid black; padding: 2px;">109980.00</span> | <span style="border: 1px solid black; padding: 2px;">109980.00</span> |
| 7. Total Disbursements (from Line 31) .....  | <span style="border: 1px solid black; padding: 2px;">109980.00</span> | <span style="border: 1px solid black; padding: 2px;">109980.00</span> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | <span style="border: 1px solid black; padding: 2px;">0.00</span>      | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |   |



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**A Bright Future**

Report Covering the Period:

From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 03  |   | 2014    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2014    |

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

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

109980.00

109980.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

109980.00

109980.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

109980.00

109980.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

109980.00

109980.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

109980.00

109980.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 60.00                         | 60.00                             |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 60.00                         | 60.00                             |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 106750.00                     | 106750.00                         |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 3170.00                       | 3170.00                           |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 3170.00                       | 3170.00                           |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 109980.00                     | 109980.00                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 109980.00                     | 109980.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 109980.00                     | 109980.00                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 3170.00                       | 3170.00                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 106810.00                     | 106810.00                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 60.00                         | 60.00                             |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 60.00                         | 60.00                             |

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

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

FOR LINE NUMBER: PAGE 6 OF 9  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**A Bright Future**

Full Name (Last, First, Middle Initial)

**A. David Brown**

Mailing Address 3577 West Gulf Drive

City State Zip Code  
 Sanibel FL 33957

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Manufacturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

99990.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period

99990.00

Donation

Full Name (Last, First, Middle Initial)

**B. David Brown**

Mailing Address 3577 West Gulf Drive

City State Zip Code  
 Sanibel FL 33957

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Manufacturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

109980.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period

9990.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

109980.00

109980.00

|  |     |   |     |  |     |  |     |  |    |  |     |
|--|-----|---|-----|--|-----|--|-----|--|----|--|-----|
|  | 21b |   | 22  |  | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  | X | 28a |  | 28b |  | 28c |  | 29 |  | 30b |

## A Bright Future

### A. David Brown

Date of Disbursement

Transaction ID : SB28A.4125

010

Category/  
Type

Amount of Each Disbursement this Period

3170.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|                |                          |           |
|----------------|--------------------------|-----------|
| 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.**

Date of Disbursement

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

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

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

3170.00

3170.00

|   |             |  |  |
|---|-------------|--|--|
| Full Name of Payee<br><b>Jill Gran</b>                          |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>04 / 09 / 2014  |  |
| Mailing Address<br>3904 Dunleer Court                           |             | Amount<br>48450.00   |  |
| City<br>Tallahassee   | State<br>FL | Zip Code<br>32309  | Transaction ID : <b>SE.4107</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>04 / 09 / 2014  |
| Purpose of Expenditure<br>Media production and airtime purchase |             | Category/<br>Type<br>004   |  |
| Name of Federal Candidate<br>PAIGE MD KREEGEL                   |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 19<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: FL        |
| Calendar Year-To-Date<br>Per Election for Office Sought         |             | 98450.00   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ► Special-Primary |

|  |   |          |
|--|---|----------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 98450.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |          |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |          |

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 9 OF 9  
FOR LINE 24 OF FORM 3X

|   |  |  |   |  |   |
|---|--|--|---|--|---|
| NAME OF COMMITTEE (In Full)<br><b>A Bright Future</b>   |  |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00560367</div>   |  |   |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>  |  |  |   |  |   |
| Full Name of Payee<br><b>Jill Gran</b>  |  |  | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 11 / 2014</div> |  |   |
| Mailing Address<br>3904 Dunleer Court   |  |  | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">6800.00</div>  |  |   |
| City<br>Tallahassee   |  | State<br>FL  | Zip Code<br>32309   |  | <b>Transaction ID : SE.4120</b>   |
| Purpose of Expenditure<br>Media production and airtime purchase   |  | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> |   | Date of Disbursement or Obligation<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 11 / 2014</div> |   |
| Name of Federal Candidate<br>PAIGE MD KREEGEL   |  |  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  |  | Office Sought: <input checked="" type="checkbox"/> House    District: 19<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL       |
| Calendar Year-To-Date<br>Per Election for Office Sought   |  |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;">106750.00</div>  |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input checked="" type="checkbox"/> Other (specify) ► Special-Primary |
| Full Name of Payee<br><b>Michael Price</b>  |  |  | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 09 / 2014</div> |  |   |
| Mailing Address<br>8011 Via Monte Carlo Way<br>108  |  |  | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">1500.00</div>  |  |   |
| City<br>Estero  |  | State<br>FL  | Zip Code<br>33928   |  | <b>Transaction ID : SE.4117</b>   |
| Purpose of Expenditure<br>Independant Contractor Assistance   |  | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> |   | Date of Disbursement or Obligation<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 09 / 2014</div> |   |
| Name of Federal Candidate<br>PAIGE MD KREEGEL   |  |  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  |  | Office Sought: <input checked="" type="checkbox"/> House    District: 19<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: FL       |
| Calendar Year-To-Date<br>Per Election for Office Sought   |  |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;">99950.00</div>   |  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input checked="" type="checkbox"/> Other (specify) ► Special-Primary |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....   |  |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;">8300.00</div>  |  |   |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....  |  |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>   |  |   |
| (c) <b>TOTAL</b> Independent Expenditures.....  |  |  | <div style="border: 1px solid black; padding: 2px; display: inline-block;">106750.00</div>  |  |   |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |  |   |  |   |
| Signature<br><br><i>Michael Price</i>   |  |  | Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 05 / 2014</div>   |  |   |
|   |  |  | [Electronically Filed]  |  |   |