

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

ADDRESS (number and street) 214 South Bronough Street
 Check if different than previously reported. (ACC)
Tallahassee FL 32302

2. **FEC IDENTIFICATION NUMBER** C00005561
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 01 2009 through 11 30 2009

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 Alma Gonzalez

Signature of Treasurer Electronically Filed by Alma Gonzalez Date 07 12 2010

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)

A. Form/Schedule : **F3XA**

Transaction ID :

.....Transfers received from the DNC, DCCC, DSCC and candidate committees, not including ASDC/Dollars for Democrats and DNC Victory Fund, were not for joint fundraising. None of the transfer in money received from the DNC or DCCC was used in the payments made for exempt activities. None of the expenses listed on Line 21b were public communications or FEA activities. None of the expenditures listed on Line 30b were expressed advocacy. The payments listed on H4, including all consulting fees, were administrative/committee fundraising expenses and not FEA nor in connection with a federal election. Payroll and all related expenses reported on Schedule H4 were for staff that did not spend more than 25% of their time on FEA or in connection with a federal election.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		260907.39
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	545202.56									
(c) Total Receipts (from Line 19)	28238.97	2098001.58								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	573441.53	2358908.97								
7. Total Disbursements (from Line 31)	54195.14	1839662.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	519246.39	519246.39								
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)	18541.50									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	850.00	159245.00
(ii) Unitemized	1010.00	92995.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1860.00	252240.73
(b) Political Party Committees	3220.00	57330.00
(c) Other Political Committees (such as PACs)	11500.00	72181.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16580.00	381752.23
12. Transfers From Affiliated/Other Party Committees	6924.00	380558.67
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)	4642.63	53301.84
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	92.34	11682.61
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	1270706.23
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	1270706.23
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28238.97	2098001.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28238.97	827295.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	17019.03	283330.29
(ii) Non-Federal Share.....	64739.22	1127001.89
(b) Other Federal Operating Expenditures.....	-4606.58	402458.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	77151.67	1812790.40
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 Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	80.00	11410.00
(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))	80.00	11410.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	-23036.53	15462.18
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	-23036.53	15462.18
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	54195.14	1839662.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-10544.08	712660.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	16580.00	381752.23
34. Total Contribution Refunds (from Line 28(d))	80.00	11410.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16500.00	370342.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12412.45	685788.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	4642.63	53301.84
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7769.82	632486.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 83
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
John J. Dingfelder

Mailing Address 3006 W San Carlos St

City Tampa State FL Zip Code 33629-6035

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

Name of Employer Scarritt Law Group Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
11 / 17 / 2009

Transaction ID: C3995320

Amount of Each Receipt this Period 500.00

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

Mailing Address 404 Park Ridge Ave

City Tampa State FL Zip Code 33617

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

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt MM / DD / YYYY
11 / 11 / 2009

Transaction ID: C3999346

Amount of Each Receipt this Period 100.00

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

Mailing Address 700 Coral Way #3

City Coral Gables State FL Zip Code 33134

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
11 / 13 / 2009

Transaction ID: C3999361

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 83	
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol Street, SE		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: C4010582
<input type="text" value="C"/> <input type="text" value="C00010603"/>		Amount of Each Receipt this Period
		<input type="text" value="3220.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="358509.61"/>	
<input type="checkbox"/> Other (specify) ▼		* In-Kind: Voter File

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3220.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3220.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 83
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE		Date of Receipt
	Mailing Address 6849 Old Dominion Drive Suite 222		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 05 / 2009
	City	State	Zip Code
	McLean	VA	22101
	FEC ID number of contributing federal political committee. C C00305318		Transaction ID: C3993414
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
		<input type="text"/> 5000.00	

B.	Full Name (Last, First, Middle Initial) Committee on Letter Carriers Political Education -		Date of Receipt
	Mailing Address 100 Indiana Ave NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 05 / 2009
	City	State	Zip Code
	Washington	DC	20001
	FEC ID number of contributing federal political committee. C C00023580		Transaction ID: C3993413
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1500.00
		<input type="text"/> 1500.00	

C.	Full Name (Last, First, Middle Initial) Squire Sanders and Dempsey LLC PAC		Date of Receipt
	Mailing Address 1201 Pennsylvania Ave NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 17 / 2009
	City	State	Zip Code
	Washington	DC	20004-2401
	FEC ID number of contributing federal political committee. C C00444935		Transaction ID: C3995321
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
		<input type="text"/> 5000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 11500.00
TOTAL This Period (last page this line number only)	<input type="text"/> 11500.00

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

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

FOR LINE NUMBER: PAGE 10 / 83
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358509.61

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

Transaction ID: C3993812

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358509.61

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

Transaction ID: C3993813

Amount of Each Receipt this Period
4924.00

SUBTOTAL of Receipts This Page (optional) ► **6924.00**

TOTAL This Period (last page this line number only) ► **6924.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 83	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial) Markel Corporation		Date of Receipt																					
Mailing Address PO Box 2010		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	7	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	7	/	2	0	0	9														
City	State	Zip Code																					
Glen Allen	VA	23058-2010																					
FEC ID number of contributing federal political committee.		Transaction ID: C3995322																					
C		Amount of Each Receipt this Period																					
		4642.63																					
Name of Employer		Occupation																					
Receipt For:		Aggregate Year-to-Date ▼																					
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		4642.63																					

SUBTOTAL of Receipts This Page (optional)	▶	4642.63
TOTAL This Period (last page this line number only)	▶	4642.63

A. Form/Schedule : **SA15**
Transaction ID : **C3995322**

Insurance paid as Admin on split. Claim paid for damages. Committee transfered non-federal share back from federal to non-federal.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 83	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial) Capital City Bank		Date of Receipt																					
Mailing Address PO Box 1630		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	3	0	/	2	0	0	9														
City	State	Zip Code	Transaction ID: C4003555																				
Tallahassee	FL	32302-1630	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="92.34"/>																				
Name of Employer	Occupation																						
Receipt For:	Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="577.61"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="92.34"/>
TOTAL This Period (last page this line number only)	<input type="text" value="92.34"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) 417 Sanford Ave DBA The Fish House</p> <p>Mailing Address 519 Sanford Avenue</p> <p>City Sanford State FL Zip Code 32771</p> <p>Purpose of Disbursement Prior Period Void 10/15/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281085 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -169.33</p>
<p>B. Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280251 Date of Disbursement 11 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 12.49</p>
<p>C. Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280252 Date of Disbursement 11 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 202.18</p>

SUBTOTAL of Disbursements This Page (optional) ▶

45.34

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

A. Form/Schedule : **SB21B**
Transaction ID : **D281085**

Duplicate payment. Deposit from 9/03/08 applied.

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 83

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D281206 Date of Disbursement																			
	Mailing Address PO Box 538695	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	0	9												
	City Atlanta State GA Zip Code 30353-8695	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Prior Period Void 10/21/2008	<table border="1"><tr><td>-367.38</td></tr></table>	-367.38																		
-367.38																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D281226 Date of Disbursement																			
	Mailing Address PO Box 538695	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	0	9												
	City Atlanta State GA Zip Code 30353-8695	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Prior Period Void 10/21/2008	<table border="1"><tr><td>-224.82</td></tr></table>	-224.82																		
-224.82																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D281227 Date of Disbursement																			
	Mailing Address PO Box 538695	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	4		2	0	0	9												
	City Atlanta State GA Zip Code 30353-8695	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Prior Period Void 10/21/2008	<table border="1"><tr><td>-451.66</td></tr></table>	-451.66																		
-451.66																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>-1043.86</td></tr></table>	-1043.86
-1043.86		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

A. Form/Schedule : **SB21B**
Transaction ID : **D281206**

Duplicate payment. Paid 11/21/08.

B. Form/Schedule : **SB21B**
Transaction ID : **D281226**

Duplicate payment. Paid 11/21/08.

C. Form/Schedule : **SB21B**

Duplicate payment. Paid 11/21/08.

Transaction ID : **D281227**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 83

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D281346 Date of Disbursement
	Mailing Address PO Box 538695	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Atlanta State GA Zip Code 30353-8695	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 10/21/2008	<input type="text" value="-112.92"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D281332 Date of Disbursement
	Mailing Address PO Box 105262	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Atlanta State GA Zip Code 30348-5262	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 10/21/2008	<input type="text" value="-56.20"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D281333 Date of Disbursement
	Mailing Address PO Box 105262	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Atlanta State GA Zip Code 30348-5262	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 10/21/2008	<input type="text" value="-91.84"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="-260.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SB21B**
Transaction ID : **D281346**

Duplicate payment. Paid 11/21/08.

B. Form/Schedule : **SB21B**
Transaction ID : **D281332**

Duplicate payment. Paid 11/21/08.

C. Form/Schedule : **SB21B**

Duplicate payment. Paid 11/21/08.

Transaction ID : **D281333**

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D281345 Date of Disbursement 11 / 04 / 2009
	Mailing Address PO Box 105262	Amount of Each Disbursement this Period -329.30
	City Atlanta State GA Zip Code 30348-5262	
	Purpose of Disbursement Prior Period Void 10/21/2008	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Authorize.Net	Transaction ID: D280253 Date of Disbursement 11 / 03 / 2009
	Mailing Address 915 South 500 East, Suite 200	Amount of Each Disbursement this Period 868.57
	City American Fork State UT Zip Code 84003	
	Purpose of Disbursement Merchant Bank Fee	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Bright House Networks	Transaction ID: D281076 Date of Disbursement 11 / 04 / 2009
	Mailing Address P.O. Box 31337	Amount of Each Disbursement this Period -209.90
	City Tampa State FL Zip Code 33630-3765	
	Purpose of Disbursement Prior Period Void 10/02/2008	Category/ Type
	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)	▶	329.37
TOTAL This Period (last page this line number only)	▶	

A. Form/Schedule : **SB21B**
Transaction ID : **D281345**

Duplicate payment. Paid 11/21/08.

C. Form/Schedule : **SB21B**
Transaction ID : **D281076**

Check written in error. Services never received.

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Bright House Networks	Transaction ID: D281309 Date of Disbursement
	Mailing Address P.O. Box 31337	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Tampa State FL Zip Code 33630-3765	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void	<input type="text" value="-614.85"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bright House Networks	Transaction ID: D281319 Date of Disbursement
	Mailing Address P.O. Box 31337	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Tampa State FL Zip Code 33630-3765	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 1/14/2009	<input type="text" value="-964.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D280304 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="283.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B**
Transaction ID : **D281309**

Duplicate payment. Payment made on 11/20/08.

B. Form/Schedule : **SB21B**
Transaction ID : **D281319**

Check written in error. Services never received.

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D280305 Date of Disbursement																			
	Mailing Address PO Box 1630	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	3	/	2	0	0	9												
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Merchant Bank Fee	<table border="1"><tr><td>225.86</td></tr></table>	225.86																		
225.86																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) City of Boynton Beach	Transaction ID: D281207 Date of Disbursement																			
	Mailing Address Rec & Parks Dept. 100 E. Boynton Beach Blvd.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	9												
	City Boynton Beach State FL Zip Code 33435	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Prior Period Void 10/22/2008	<table border="1"><tr><td>-75.00</td></tr></table>	-75.00																		
-75.00																					
	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:																				

C.	Full Name (Last, First, Middle Initial) City of Boynton Beach	Transaction ID: D281209 Date of Disbursement																			
	Mailing Address Rec & Parks Dept. 100 E. Boynton Beach Blvd.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	9												
	City Boynton Beach State FL Zip Code 33435	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Prior Period Void 10/22/2008	<table border="1"><tr><td>-300.00</td></tr></table>	-300.00																		
-300.00																					
	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)	<table border="1"><tr><td>-149.14</td></tr></table>	-149.14
-149.14		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

B. Form/Schedule : **SB21B**
Transaction ID : **D281207**

Check issued in error. Event did not take place so service was not needed.

C. Form/Schedule : **SB21B**
Transaction ID : **D281209**

Check issued in error. Event did not take place so service was not needed.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) City of Boynton Beach</p> <p>Mailing Address Rec & Parks Dept. 100 E. Boynton Beach Blvd.</p> <p>City Boynton Beach State FL Zip Code 33435</p> <p>Purpose of Disbursement Prior Period Void 10/22/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281210 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -25.00</p>
<p>B. Full Name (Last, First, Middle Initial) City of Gainesville</p> <p>Mailing Address 413 N. 8th Ave.</p> <p>City Gainesville State FL Zip Code 32602</p> <p>Purpose of Disbursement Prior Period Void 10/14/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281083 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -29.00</p>
<p>C. Full Name (Last, First, Middle Initial) City of Lake Wales</p> <p>Mailing Address CFC c/o Vicki Dillon 5385 Gateway Blvd.</p> <p>City Lakeland State FL Zip Code 33801</p> <p>Purpose of Disbursement Prior Period Void 10/14/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281081 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -44.80</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-98.80

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

A. Form/Schedule : **SB21B**
Transaction ID : **D281210**

Check issued in error. Event did not take place so service was not needed.

B. Form/Schedule : **SB21B**
Transaction ID : **D281083**

Check issued in error. Event did not take place.

C. Form/Schedule : **SB21B**
Transaction ID : **D281081**

Check issued in error. Event did not take place.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: D281308 Date of Disbursement 11 / 04 / 2009
	Mailing Address PO Box 105184	Amount of Each Disbursement this Period -505.87
	City Atlanta State GA Zip Code 30348-5184	
	Purpose of Disbursement Prior Period VOID 11/12/2008	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democratic National Committee	Transaction ID: D280344 Date of Disbursement 11 / 05 / 2009
	Mailing Address 430 South Capitol Street, SE	Amount of Each Disbursement this Period 3220.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Voter File	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

* In-Kind Received

C.	Full Name (Last, First, Middle Initial) Florida Power & Light Company	Transaction ID: D281315 Date of Disbursement 11 / 04 / 2009
	Mailing Address PO Box 025576	Amount of Each Disbursement this Period -499.55
	City Miami State FL Zip Code 33102-5576	
	Purpose of Disbursement Prior Period Void 12/30/2008	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2214.58
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SB21B**
Transaction ID : **D281308**

Duplicate payment. Payment made on 10/20/08.

C. Form/Schedule : **SB21B**
Transaction ID : **D281315**

Check written in error. Services never received.

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Florida Power & Light Company <hr/> Mailing Address PO Box 025576 <hr/> City Miami State FL Zip Code 33102-5576 <hr/> Purpose of Disbursement Prior Period Void 12/30/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281316 Date of Disbursement 11 / 04 / 2009	Amount of Each Disbursement this Period -174.59
B.	Full Name (Last, First, Middle Initial) James M Forsyth <hr/> Mailing Address 1910 E Palm Ave <hr/> City Tampa State FL Zip Code 33605 <hr/> Purpose of Disbursement Prior Period VOID 10/3/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281078 Date of Disbursement 11 / 04 / 2009	Amount of Each Disbursement this Period -11.41
C.	Full Name (Last, First, Middle Initial) Friendship Missionary Baptist Church <hr/> Mailing Address 2030 Palm Ave. <hr/> City Fort Myers State FL Zip Code 33916 <hr/> Purpose of Disbursement Prior Period Void 10/21/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281200 Date of Disbursement 11 / 04 / 2009	Amount of Each Disbursement this Period -100.00

SUBTOTAL of Disbursements This Page (optional)	-286.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SB21B**
Transaction ID : **D281316**

Check written in error. Services never received.

C. Form/Schedule : **SB21B**
Transaction ID : **D281200**

Check issued in error. Event did not take place.

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Christine Frogozo</p> <p>Mailing Address 1366 Riviera Ave.</p> <p>City Venice State CA Zip Code 90291</p> <p>Purpose of Disbursement Prior Period Void 11/06/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281287 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -19.93</p>
<p>B. Full Name (Last, First, Middle Initial) Carlise Gill</p> <p>Mailing Address 1289 Windy Willows Dr</p> <p>City Jacksonville State FL Zip Code 32225</p> <p>Purpose of Disbursement Prior Period Void 12/9/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281314 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -100.00</p>
<p>C. Full Name (Last, First, Middle Initial) Glovenia Enterprises, LLC</p> <p>Mailing Address Attn: Jim Taube 1921 Capital Circle NE</p> <p>City Tallahassee State FL Zip Code 32308</p> <p>Purpose of Disbursement Prior Period Void 10/14</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281082 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-619.93

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

B. Form/Schedule : **SB21B**
Transaction ID : **D281314**

Check written in error. Services never received.

C. Form/Schedule : **SB21B**
Transaction ID : **D281082**

Duplicate payment. Payment was made on 10/16/08.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Kristen Harper	Transaction ID: D281293 Date of Disbursement 11 / 04 / 2009
	Mailing Address 3750 Silver Bluff Blvd Apt 2406	Amount of Each Disbursement this Period -505.58
	City Orange Park State FL Zip Code 32065-4269	
	Purpose of Disbursement Prior Period Void 11/07/2009	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Carrie-Lynn Hodge	Transaction ID: D281074 Date of Disbursement 11 / 04 / 2009
	Mailing Address 3865 Shady Run Rd. ----	Amount of Each Disbursement this Period -25.00
	City Melbourne State FL Zip Code 32934	
	Purpose of Disbursement Prior Period Void 9/11/2008	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Jeff Branch	Transaction ID: D281225 Date of Disbursement 11 / 04 / 2009
	Mailing Address 717 S. Boundary Ave.	Amount of Each Disbursement this Period -66.69
	City Deland State FL Zip Code 32720	
	Purpose of Disbursement Prior Period Void 11/04/2008	Category/ Type
	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)	-597.27
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 83

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Joshua Maddock</p> <p>Mailing Address 623 Park Pl Apt. 12</p> <p>City West Palm Beach State FL Zip Code 33401</p> <p>Purpose of Disbursement Prior Period Void 9/02/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D280705 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -102.11</p>
<p>B. Full Name (Last, First, Middle Initial) Nobel Biz, Inc.</p> <p>Mailing Address 430 S. Capitol St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Prior Period Void 11/12/2009</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281310 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -1662.05</p>
<p>C. Full Name (Last, First, Middle Initial) Nina Soares</p> <p>Mailing Address 4681 Sierra Madre Rd</p> <p>City Santa Barbara State CA Zip Code 93110</p> <p>Purpose of Disbursement Prior Period Void 9/11/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281073 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -50.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-1814.16

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

B. Form/Schedule : **SB21B**
Transaction ID : **D281310**

Duplicate payment. Payment made on 11/18/08.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) The Experts, LLC <hr/> Mailing Address 600 NW 183rd St <hr/> City Miami Gardens State FL Zip Code 33169-4470 Purpose of Disbursement Prior Period VOID 9/12/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281075 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -1000.00
B. Full Name (Last, First, Middle Initial) Time + Plus Payroll Services <hr/> Mailing Address 500 Colonial Center Parkway Suite 650 <hr/> City Atlanta State GA Zip Code 30076 Purpose of Disbursement Prior Period Void 12/30/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281320 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -29.84

SUBTOTAL of Disbursements This Page (optional) ►

-1029.84

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

-4606.58

A. Form/Schedule : **SB21B**
Transaction ID : **D281075**

Duplicate payment. Deposit from 7/23/08 applied.

B. Form/Schedule : **SB21B**
Transaction ID : **D281320**

Check issued in error.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Corinne T. T. Miller

Transaction ID: D278634

Date of Disbursement

Mailing Address 22065 Palms Way
Apt 101

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

City Boca Raton State FL Zip Code 33433-8014

Amount of Each Disbursement this Period

80.00

Purpose of Disbursement
Conference Refund

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

80.00

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

80.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Matthew Adler	Transaction ID: D281222 Date of Disbursement
	Mailing Address 8022 Inverness Ridge Rd.	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Potomac State MD Zip Code 20854	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 10/30/2008	<input type="text" value="-987.93"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Aaron Banks	Transaction ID: D281288 Date of Disbursement
	Mailing Address 1001 L Street NW, Apt #905	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 11/07/2008	<input type="text" value="-299.26"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jolee Boyd	Transaction ID: D281302 Date of Disbursement
	Mailing Address 14833 Two Bar Rd	<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Boulder Creek State CA Zip Code 95006	Amount of Each Disbursement this Period
	Purpose of Disbursement Prior Period Void 11/07/2008	<input type="text" value="-323.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="-1610.41"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Lauren Bresnahan</p> <p>Mailing Address 3500 SW 19th Avenue</p> <p>City Gainesville State FL Zip Code 32607</p> <p>Purpose of Disbursement Prior Period Void 11/07</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281307 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-299.26</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	9	-299.26
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	4	/	2	0	0	9													
-299.26																						
<p>B. Full Name (Last, First, Middle Initial) John Brower</p> <p>Mailing Address 3209 Hanging Vine Ct</p> <p>City Land O Lakes State FL Zip Code 34639</p> <p>Purpose of Disbursement Prior Period Void 11/07/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281303 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-323.22</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	9	-323.22
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	4	/	2	0	0	9													
-323.22																						
<p>C. Full Name (Last, First, Middle Initial) Akilah Carter-Davis</p> <p>Mailing Address 4545 S Drexel Blvd Unit 1c</p> <p>City Chicago State IL Zip Code 60653</p> <p>Purpose of Disbursement Prior Period Void 11/07/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281305 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">-964.20</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	9	-964.20
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	4	/	2	0	0	9													
-964.20																						

SUBTOTAL of Disbursements This Page (optional) ▶

-1586.68

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Amanda K Christensen</p> <p>Mailing Address 7560 CR 659</p> <p>City Bushnell State FL Zip Code 33513</p> <p>Purpose of Disbursement Prior Period Void 11/07/2009</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281306 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -313.84</p>
<p>B. Full Name (Last, First, Middle Initial) City of St. Petersburg</p> <p>Mailing Address P.O. 2842 P.O. Box 33034</p> <p>City Saint Petersburg State FL Zip Code 33731</p> <p>Purpose of Disbursement Prior Period Void 10/14/2009</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281079 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -55.00</p>
<p>C. Full Name (Last, First, Middle Initial) Paul Cleveland</p> <p>Mailing Address 1722 SW 157th Place Road</p> <p>City Ocala State FL Zip Code 34473</p> <p>Purpose of Disbursement Prior Period Void 10/30/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281218 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -772.40</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-1141.24

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

B. Form/Schedule : **SB30B**
Transaction ID : **D281079**

Check issued in error. Event did not take place. Original disbursement made on 10/4/08.

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Bayley Dixon	Transaction ID: D281301 Date of Disbursement 11 / 04 / 2009
	Mailing Address 62 Linda Vista Ave	Amount of Each Disbursement this Period -299.26
	City Atherton State CA Zip Code 94027	
	Purpose of Disbursement Prior Period Void 11/07/2008	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mitch Emerson	Transaction ID: D280704 Date of Disbursement 11 / 04 / 2009
	Mailing Address 4518 Alice St. ---	Amount of Each Disbursement this Period -1021.25
	City San Diego State CA Zip Code 92115	
	Purpose of Disbursement Prior Period Void 8/18/2008	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jeffrey R Gabriel	Transaction ID: D281300 Date of Disbursement 11 / 04 / 2009
	Mailing Address 1639 Camden Ave Apt 303	Amount of Each Disbursement this Period -483.70
	City Los Angeles State CA Zip Code 90025-7523	
	Purpose of Disbursement Prior Period Void 11/07/2008	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	-1804.21
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sandra Gallagher Mailing Address 5701 NW 114 Ct #101 City Doral State FL Zip Code 33178 Purpose of Disbursement Prior Period Void 11/07/2008 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281299 Date of Disbursement 11 / 04 / 2009	Amount of Each Disbursement this Period -299.26
B.	Full Name (Last, First, Middle Initial) Steven Graham Mailing Address 1385 Forestedge Blvd City Oldsmar State FL Zip Code 34677-5119 Purpose of Disbursement Prior Period Void 11/07/2008 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281294 Date of Disbursement 11 / 04 / 2009	Amount of Each Disbursement this Period -323.22
C.	Full Name (Last, First, Middle Initial) Julien Greboval Mailing Address 219 Greenwood Dr. City Peace Dale State RI Zip Code 02879 Purpose of Disbursement Prior Period Void 9/05/2008 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D280706 Date of Disbursement 11 / 04 / 2009	Amount of Each Disbursement this Period -1021.25

SUBTOTAL of Disbursements This Page (optional) ▶

-1643.73

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) H.O.P.E., Inc. of Jacksonville Mailing Address c/o Dorian Carter 1732 Margaret St. City Jacksonville State FL Zip Code 32204 Purpose of Disbursement Prior Period Void 10/02/2008 Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281077 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period -492.20
B.	Full Name (Last, First, Middle Initial) Kristen Harper Mailing Address 3750 Silver Bluff Blvd Apt 2406 City Orange Park State FL Zip Code 32065-4269 Purpose of Disbursement Prior Period Void 11/14/2008 Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281313 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period -1894.21
C.	Full Name (Last, First, Middle Initial) Florence K Henley Mailing Address 330 S Palo Alto Ave City Panama City State FL Zip Code 32401 Purpose of Disbursement Prior Period Void 10/15/2008 Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281198 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period -554.10

SUBTOTAL of Disbursements This Page (optional)			-2940.51
TOTAL This Period (last page this line number only)			

A. Form/Schedule : **SB30B**
Transaction ID : **D281077**

Check issued in error. Event did not take place. Original disbursement on 10/2/08.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Olivia Magowen</p> <p>Mailing Address 720 Park Ave.</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Prior Period Void 11/7/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281318 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -678.99</p>
<p>B. Full Name (Last, First, Middle Initial) Alvin McDavid</p> <p>Mailing Address 5751 NW 185 Street</p> <p>City Reddick State FL Zip Code 32686</p> <p>Purpose of Disbursement Prior Period Void 10/30/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281219 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -999.37</p>
<p>C. Full Name (Last, First, Middle Initial) Michael Misterek</p> <p>Mailing Address 2880 Irving Avenue S</p> <p>City Minneapolis State MN Zip Code 55408</p> <p>Purpose of Disbursement Prior Period Void 10/30/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281224 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -496.60</p>

SUBTOTAL of Disbursements This Page (optional)	-2174.96
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Peter W Montaner <hr/> Mailing Address 13 Linstead Rd <hr/> City Severna Park State MD Zip Code 21146 <hr/> Purpose of Disbursement Prior Period Void 10/15 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281197 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -134.56
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Florence Moss <hr/> Mailing Address 1250 N.E. 125th St., #420 <hr/> City North Miami State FL Zip Code 33161 <hr/> Purpose of Disbursement Prior Period Void 10/15/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281317 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -1150.17
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Florence Moss <hr/> Mailing Address 1250 N.E. 125th St., #420 <hr/> City North Miami State FL Zip Code 33161 <hr/> Purpose of Disbursement Prior Period Void 10/15/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281194 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -768.22
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

-2052.95

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

B. Form/Schedule : **SB30B**
Transaction ID : **D281317**

Original disbursement made on 10/15/08.

C. Form/Schedule : **SB30B**
Transaction ID : **D281194**

Original disbursement made on 10/17/08.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Aaron Myers</p> <p>Mailing Address 200 S. Benton St. Apt. 101</p> <p>City Corsicano State TX Zip Code 75110</p> <p>Purpose of Disbursement Prior Period Void 11/30/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281311 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -1967.13</p>
<p>B. Full Name (Last, First, Middle Initial) Elizabeth P Pollart-Smith</p> <p>Mailing Address 77 Pinebrook Dr</p> <p>City Larchmont State NY Zip Code 10538-2519</p> <p>Purpose of Disbursement Prior Period Void 10/15/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281193 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -459.67</p>
<p>C. Full Name (Last, First, Middle Initial) Nick Rahall</p> <p>Mailing Address 300 E. Prince St.</p> <p>City Beckley State WV Zip Code 25801</p> <p>Purpose of Disbursement Prior Period Void 10/15/2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D281196 Date of Disbursement 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period -719.78</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-3146.58

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Cynthia Rose <hr/> Mailing Address 1115 NE 4th St <hr/> City Ocala State FL Zip Code 34470-5961 <hr/> Purpose of Disbursement Prior Period Void 11/07/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281292 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -321.55
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Kurt Sackerman <hr/> Mailing Address 3616 Sugarloaf Ct. <hr/> City Columbus State OH Zip Code 43212 <hr/> Purpose of Disbursement Prior Period Void 10/15/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281195 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -515.94
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Andrew Shipley <hr/> Mailing Address 9 Westminister <hr/> City Lake Oswego State OR Zip Code 97034 <hr/> Purpose of Disbursement Prior Period Void 10/30/2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D281220 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period -772.40
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

-1609.89

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jay Shuford	Transaction ID: D281199 Date of Disbursement MM / DD / YYYY 11 / 04 / 2009
	Mailing Address 2802 Sarento Place	Amount of Each Disbursement this Period -1004.60
	City Palm Beach Gardens State FL Zip Code 33410	
	Purpose of Disbursement Prior Period Void 10/15/2008	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jay Shuford	Transaction ID: D281291 Date of Disbursement MM / DD / YYYY 11 / 04 / 2009
	Mailing Address 2802 Sarento Place	Amount of Each Disbursement this Period -466.55
	City Palm Beach Gardens State FL Zip Code 33410	
	Purpose of Disbursement Prior Period Void 11/07/2008	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ashima Singal	Transaction ID: D281290 Date of Disbursement MM / DD / YYYY 11 / 04 / 2009
	Mailing Address 1371 Hunter Cir	Amount of Each Disbursement this Period -299.26
	City Naperville State IL Zip Code 60540-8382	
	Purpose of Disbursement Prior Period Void 11/07/2008	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	-1770.41
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Mary Warren Mailing Address 11850 Dr. MLK JR #12106 City Saint Petersburg State FL Zip Code 33716 Purpose of Disbursement Prior Period Void 10/30/2008 Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281223 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period -277.05
B.	Full Name (Last, First, Middle Initial) Amanda V Wilkerson Mailing Address 1616 McCaskill Ave City Tallahassee State FL Zip Code 32310 Purpose of Disbursement Prior Period Void 10/30/2008 Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281216 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period -250.00
C.	Full Name (Last, First, Middle Initial) Justin Willis Mailing Address 214 South Bronough St City Tallahassee State FL Zip Code 32301 Purpose of Disbursement Prior Period Void 10/30/2009 Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D281221 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period -728.65

SUBTOTAL of Disbursements This Page (optional) ▶	-1255.70
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 / 83

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Justin Willis

Transaction ID: D281289

Date of Disbursement

Mailing Address 214 South Bronough St

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	9

City State Zip Code
Tallahassee FL 32301

Amount of Each Disbursement this Period

-299.26

Purpose of Disbursement
Prion Period Void 11/07/2008

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

-299.26

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

-23036.53

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 59 / 83
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Production Resource Group			Nature of Debt (Purpose): Audio Visual/Conference
Mailing Address 1902 Cypress Lake Dr			
City Orlando	State FL	ZIP Code 32837-8458	

Outstanding Balance Beginning This Period		Transaction ID: D119404	
18541.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	18541.50	

1) SUBTOTALS This Period This Page (optional).....	18541.50
2) TOTALS This Period (last page this line number only).....	18541.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	18541.50

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Anagram Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 310 W Jefferson St			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32301-1419	Date M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 9		
Purpose of Disbursement: Admin Lease/Rent			Transaction ID: D278722		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
620.81		2335.44		2956.25

B. Full Name (Last, First, Middle Initial) AT&T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 538695			Allocated Activity or Event Year-To-Date 1087162.72		
City Atlanta	State GA	Zip Code 30353-8695	Date M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 9		
Purpose of Disbursement: Admin Internet			Transaction ID: D278607		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.77		55.57		70.34

C. Full Name (Last, First, Middle Initial) Aventura Worldwide			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2025 NE 15th Court			Allocated Activity or Event Year-To-Date 1087162.72		
City North Miami Beach	State FL	Zip Code 33179	Date M M / D D / Y Y Y Y 1 1 / 2 7 / 2 0 0 9		
Purpose of Disbursement: Auto Travel			Transaction ID: D280249		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.32		493.99		625.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
766.90		2885.00		3651.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Aventura Worldwide			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2025 NE 15th Court			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">1087162.72</div>	
City North Miami Beach	State FL	Zip Code 33179	Category/ Type	
Purpose of Disbursement: Auto Travel				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 27 / 2009</div>	
			Transaction ID: D280250	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.32		493.99		625.31

B. Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 2210			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">1087162.72</div>	
City Jacksonville	State FL	Zip Code 32232-5005	Category/ Type	
Purpose of Disbursement: Benefits				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 04 / 2009</div>	
			Transaction ID: D278627	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1266.06		4762.76		6028.82

C. Full Name (Last, First, Middle Initial) Blue State Digital, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 734 15th Street, NW, Suite 1200			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">1087162.72</div>	
City Washington	State DC	Zip Code 20005	Category/ Type	
Purpose of Disbursement: Website				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2009</div>	
			Transaction ID: D278631	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
299.09		1125.16		1424.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1696.47		6381.91		8078.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Bullseye Interactive Media			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 700 7th St SE			Allocated Activity or Event Year-To-Date 1087162.72		
City Washington	State DC	Zip Code 20003-2739	Date MM / DD / YYYY 11 / 19 / 2009		
Purpose of Disbursement: Internet Services			Transaction ID: D279930		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
950.00		4050.00		5000.00

B. Full Name (Last, First, Middle Initial) Capital Lanes			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 820 Capital Circle NE			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32301	Date MM / DD / YYYY 11 / 17 / 2009		
Purpose of Disbursement: Meeting Expense			Transaction ID: D278856		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.93		26.07		33.00

C. Full Name (Last, First, Middle Initial) Continental Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 4607			Allocated Activity or Event Year-To-Date 1087162.72		
City Houston	State TX	Zip Code 77210-4607	Date MM / DD / YYYY 11 / 16 / 2009		
Purpose of Disbursement: Air Travel			Transaction ID: D279964		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.29		414.91		525.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1067.22		4490.98		5558.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) DeltaCom1058			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 740597			Allocated Activity or Event Year-To-Date 1087162.72		
City Atlanta	State GA	Zip Code 30374-0597	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Admin. Telephone			Transaction ID: D278835		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.91		428.52		542.43

B. Full Name (Last, First, Middle Initial) Eddie Todd, Jr.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17623			Allocated Activity or Event Year-To-Date 1087162.72		
City Pensacola	State FL	Zip Code 32522-7623	Date <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Maintenance/Repairs			Transaction ID: D278619		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		3160.00		4000.00

C. Full Name (Last, First, Middle Initial) Embarq Communications Charlotte			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 96064			Allocated Activity or Event Year-To-Date 1087162.72		
City Charlotte	State NC	Zip Code 28296-0064	Date <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Admin Telephone			Transaction ID: D278613		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.59		476.23		602.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1080.50		4064.75		5145.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Eric Perrott			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 704 G St NE Apt B			Allocated Activity or Event Year-To-Date 1087162.72		
City Washington	State DC	Zip Code 20002-3681	Date MM / DD / YYYY 11 / 04 / 2009		
Purpose of Disbursement: Consulting/IT			Transaction ID: D278836		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

B. Full Name (Last, First, Middle Initial) Everest National Insurance Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 917807			Allocated Activity or Event Year-To-Date 1087162.72		
City Orlando	State FL	Zip Code 32891-7807	Date MM / DD / YYYY 11 / 04 / 2009		
Purpose of Disbursement: Benefits			Transaction ID: D278633		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.24		192.76		244.00

C. Full Name (Last, First, Middle Initial) Hampton Inn Corporate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9336 Civic Center Drive			Allocated Activity or Event Year-To-Date 1087162.72		
City Beverly Hills	State CA	Zip Code 90210	Date MM / DD / YYYY 11 / 19 / 2009		
Purpose of Disbursement: Admin. Lodging			Transaction ID: D279963		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.93		78.75		99.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
282.17		1061.51		1343.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W. 56th St., Suite 1601			Allocated Activity or Event Year-To-Date 1087162.72		
City NY	State NY	Zip Code 10019	Date MM / DD / YYYY 11 / 02 / 2009		
Purpose of Disbursement: Admin Internet			Transaction ID: D278682		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.32		264.53		334.85

B. Full Name (Last, First, Middle Initial) Internal Revenue Service Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 409101			Allocated Activity or Event Year-To-Date 1087162.72		
City Ogden	State UT	Zip Code 84409-9101	Date MM / DD / YYYY 11 / 11 / 2009		
Purpose of Disbursement: Payroll Tax			Transaction ID: D278716		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
443.02		1888.69		2331.71

C. Full Name (Last, First, Middle Initial) Intuit Software			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2632 Marine Way			Allocated Activity or Event Year-To-Date 1087162.72		
City Mountain View	State CA	Zip Code 94043-1126	Date MM / DD / YYYY 11 / 18 / 2009		
Purpose of Disbursement: Admin. Office Supplies			Transaction ID: D279962		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.53		129.90		164.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
547.87		2283.12		2830.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Microsoft Office			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 Microsoft Way			Allocated Activity or Event Year-To-Date 1087162.72	
City	State	Zip Code	Category/ Type	
Redmond	WA	78507		
Purpose of Disbursement: Admin. Office Supplies			Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9	
Activity or Event Identifier: Administrative			Transaction ID: D280254	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.00		157.99		199.99

B. Full Name (Last, First, Middle Initial) Microsoft Office			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 Microsoft Way			Allocated Activity or Event Year-To-Date 1087162.72	
City	State	Zip Code	Category/ Type	
Redmond	WA	78507		
Purpose of Disbursement: Admin. Office Supplies			Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9	
Activity or Event Identifier: Administrative			Transaction ID: D280255	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.74		375.20		474.94

C. Full Name (Last, First, Middle Initial) Osmond Johnson Janitorial Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 24131 Lake Talquin Drive			Allocated Activity or Event Year-To-Date 1087162.72	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32310-4603		
Purpose of Disbursement: Janitorial Service			Date M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 9	
Activity or Event Identifier: Administrative			Transaction ID: D278612	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.74		1007.19		1274.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2069 North Monroe Street			Allocated Activity or Event Year-To-Date 1087162.72	
City Tallahassee	State FL	Zip Code 32303	Category/ Type	
Purpose of Disbursement: Payroll Tax				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 9 Transaction ID: D278929	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1280.05		4815.41		6095.46

B. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2069 North Monroe Street			Allocated Activity or Event Year-To-Date 1087162.72	
City Tallahassee	State FL	Zip Code 32303	Category/ Type	
Purpose of Disbursement: Payroll Fees				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 9 Transaction ID: D278930	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

C. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2069 North Monroe Street			Allocated Activity or Event Year-To-Date 1087162.72	
City Tallahassee	State FL	Zip Code 32303	Category/ Type	
Purpose of Disbursement: Payroll Tax				
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9 Transaction ID: D279980	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1264.79		4758.04		6022.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2553.24		9605.05		12158.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 North Monroe Street			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32303	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Payroll Fee			Transaction ID: D279981		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.77		29.23		37.00

B. Full Name (Last, First, Middle Initial) Ricoh Americas Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21146 Network Place			Allocated Activity or Event Year-To-Date 1087162.72		
City Chicago	State IL	Zip Code 60673-1211	Date <input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Admin. Lease/Rent			Transaction ID: D279518		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.03		308.59		390.62

C. Full Name (Last, First, Middle Initial) T-Mobile			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 742596			Allocated Activity or Event Year-To-Date 1087162.72		
City Cincinnati	State OH	Zip Code 45274-2596	Date <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D278614		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.94		144.67		178.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
123.74		482.49		606.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7247-0244			Allocated Activity or Event Year-To-Date 1087162.72		
City Philadelphia	State PA	Zip Code 19170-0001	Date MM / DD / YYYY 11 / 11 / 2009		
Purpose of Disbursement: Admin Shipping			Transaction ID: D278724		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.34		20.08		25.42

B. Full Name (Last, First, Middle Initial) Wal-Mart			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7000 Marina Blvd			Allocated Activity or Event Year-To-Date 1087162.72		
City Brisbane	State CA	Zip Code 94005-1815	Date MM / DD / YYYY 11 / 06 / 2009		
Purpose of Disbursement: Admin. Office Supplies			Transaction ID: D279912		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.66		81.48		103.14

C. Full Name (Last, First, Middle Initial) Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Road			Allocated Activity or Event Year-To-Date 1087162.72		
City Jacksonville	State FL	Zip Code 32207	Date MM / DD / YYYY 11 / 03 / 2009		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D278605		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.40		584.60		740.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.40		686.16		868.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Polos on Park

Mailing Address
2626 Park Ave

City Tallahassee	State FL	Zip Code 32301	Category/ Type
Purpose of Disbursement: Travel/Lodging			

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D278606

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.40		584.60		740.00

B. Full Name (Last, First, Middle Initial)
Karen L. Thurman

Mailing Address
9067 S.W. 190th Ave., Rd.

City Dunnellon	State FL	Zip Code 34423	Category/ Type
Purpose of Disbursement: Staff Reimbursement			

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D278608

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

C. Full Name (Last, First, Middle Initial)
Doverree Properties, LLC

Mailing Address
Attn: Mr. Leonard Pepper 310 W. Jefferson St.

City Tallahassee	State FL	Zip Code 32301-1419	Category/ Type
Purpose of Disbursement: Lodging			

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D278609

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3607 Eagle Nest Court			Allocated Activity or Event Year-To-Date 1087162.72	
City	State	Zip Code	Category/ Type	
Melbourne	FL	32904		
Purpose of Disbursement: Staff Reimbursement			Date M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 9	
Activity or Event Identifier: Administrative			Transaction ID: D278725	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.53		208.90		264.43

B. Full Name (Last, First, Middle Initial) CVS Pharmacy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1708 N Monroe St			Allocated Activity or Event Year-To-Date 1087162.72	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32303-5535		
Purpose of Disbursement: Admin. Office Supplies			Date M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 9	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D278727	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.31		8.68		10.99

C. Full Name (Last, First, Middle Initial) Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3607 Eagle Nest Court			Allocated Activity or Event Year-To-Date 1087162.72	
City	State	Zip Code	Category/ Type	
Melbourne	FL	32904		
Purpose of Disbursement: Auto Travel			Date M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 9	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D278726	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.22		200.22		253.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.53		208.90		264.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 10302			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32302	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D278837		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

B. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 660108			Allocated Activity or Event Year-To-Date 1087162.72		
City Dallas	State TX	Zip Code 75266	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D278838		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

C. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 North Monroe Street			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32303	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Payroll			Transaction ID: D278928		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3662.63		13778.47		17441.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3687.83		13873.27		17561.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Ms. Christina Boltin

Mailing Address
P. O. Box 10302

City State Zip Code
Tallahassee FL 32302

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 11 / 15 / 2009

Transaction ID: D278931

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
342.93		1290.07		1633.00

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

Mailing Address
3607 Eagle Nest Court

City State Zip Code
Melbourne FL 32904

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 11 / 15 / 2009

Transaction ID: D278932

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
333.09		1253.07		1586.16

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

Mailing Address
9886 N Kendall Dr Apt H113

City State Zip Code
Miami FL 33176-1839

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 11 / 15 / 2009

Transaction ID: D278934

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
188.02		707.33		895.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Libby Presnell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2125 E. Dellview Rd.			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32303	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Salary			Transaction ID: D278935		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
273.05		1027.18		1300.23

B. Full Name (Last, First, Middle Initial) Marilyn Waters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2107 Scenic Road			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32303	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Salary			Transaction ID: D278940		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.76		29.18		36.94

C. Full Name (Last, First, Middle Initial) Mildred O. Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3550 Esplanade Way, #8107			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32811	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>		
Purpose of Disbursement: Salary			Transaction ID: D278937		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
291.45		1096.39		1387.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Ms. Anne O Morgan

Mailing Address
741 W Keller St

City State Zip Code
Hernando FL 34442-8810

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Date 11 / 15 / 2009

Transaction ID: D278933

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
564.40		2123.22		2687.62

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

Mailing Address
445 Appleyard Drive #A2-5

City State Zip Code
Tallahassee FL 32304

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Date 11 / 15 / 2009

Transaction ID: D278938

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.81		499.63		632.44

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

Mailing Address
1544 Lorimier Road

City State Zip Code
Jacksonville FL 32207

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Date 11 / 15 / 2009

Transaction ID: D278936

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
847.73		3189.09		4036.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Karen L. Thurman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9067 S.W. 190th Ave., Rd.			Allocated Activity or Event Year-To-Date 1087162.72		
City Dunnellon	State FL	Zip Code 34423	Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 9		
Purpose of Disbursement: Salary			Transaction ID: D278939		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
681.39		2563.31		3244.70

B. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 North Monroe Street			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32303	Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9		
Purpose of Disbursement: Payroll			Transaction ID: D279979		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3519.16		13238.75		16757.91

C. Full Name (Last, First, Middle Initial) Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P. O. Box 10302			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32302	Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 9		
Purpose of Disbursement: Salary			Transaction ID: D279982		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
342.93		1290.08		1633.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3519.16		13238.75		16757.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Eric Jotkoff

Mailing Address
3607 Eagle Nest Court

City State Zip Code
Melbourne FL 32904

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 11 / 30 / 2009

Transaction ID: D279983

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
333.09		1253.06		1586.15

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

Mailing Address
2125 E. Dellview Rd.

City State Zip Code
Tallahassee FL 32303

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 11 / 30 / 2009

Transaction ID: D279985

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
273.05		1027.17		1300.22

C. Full Name (Last, First, Middle Initial)
Mildred O. Smith

Mailing Address
3550 Esplanade Way, #8107

City State Zip Code
Tallahassee FL 32811

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 11 / 30 / 2009

Transaction ID: D279986

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
291.45		1096.40		1387.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Ms. Anne O Morgan

Mailing Address
741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date

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

Transaction ID: D279984

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
564.40		2123.23		2687.63

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

Mailing Address
445 Appleyard Drive #A2-5

City	State	Zip Code
Tallahassee	FL	32304

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date

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

Transaction ID: D279988

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.12		696.39		881.51

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

Mailing Address
1544 Lorimier Road

City	State	Zip Code
Jacksonville	FL	32207

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1087162.72

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date

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

Transaction ID: D279987

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
847.73		3189.10		4036.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Karen L. Thurman
Mailing Address
9067 S.W. 190th Ave., Rd.
City **State** **Zip Code**
Dunnellon FL 34423
Purpose of Disbursement:
Salary
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
1087162.72
Date **M M** / **D D** / **Y Y Y Y**
1 1 / 3 0 / 2 0 0 9
Transaction ID: D279989

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
681.39		2563.32		3244.71

B. Full Name (Last, First, Middle Initial)
Kyle Schulberg
Mailing Address
9886 N Kendall Dr Apt H113
City **State** **Zip Code**
Miami FL 33176-1839
Purpose of Disbursement:
Staff Reimbursement
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
1087162.72
Date **M M** / **D D** / **Y Y Y Y**
1 1 / 1 9 / 2 0 0 9
Transaction ID: D280070

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

C. Full Name (Last, First, Middle Initial)
AT&T Mobility
Mailing Address
PO Box 538695
City **State** **Zip Code**
Atlanta GA 30353-8695
Purpose of Disbursement:
Admin. Cell Phone
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
1087162.72
Date **M M** / **D D** / **Y Y Y Y**
1 1 / 1 9 / 2 0 0 9
Transaction ID: D280071

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Road			Allocated Activity or Event Year-To-Date 1087162.72		
City Jacksonville	State FL	Zip Code 32207	Date MM / DD / YYYY 11 / 13 / 2009		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D280072		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.57		152.61		193.18

B. Full Name (Last, First, Middle Initial) Shula's 347			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 415 N Monroe St			Allocated Activity or Event Year-To-Date 1087162.72		
City Tallahassee	State FL	Zip Code 32301-1257	Date MM / DD / YYYY 11 / 13 / 2009		
Purpose of Disbursement: Dinner Meeting			Transaction ID: D280073		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.57		152.61		193.18

C. Full Name (Last, First, Middle Initial) Karen L. Thurman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9067 S.W. 190th Ave., Rd.			Allocated Activity or Event Year-To-Date 1087162.72		
City Dunnellon	State FL	Zip Code 34423	Date MM / DD / YYYY 11 / 19 / 2009		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D280085		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.34		358.68		454.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
135.91		511.29		647.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Harry's Bar & Grill

Mailing Address
301 S. Bronough St.

City Tallahassee	State FL	Zip Code 32301	Category/ Type
Purpose of Disbursement: Dinner Meeting			

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D280087

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.81		74.51		94.32

B. Full Name (Last, First, Middle Initial)
Karen L. Thurman

Mailing Address
9067 S.W. 190th Ave., Rd.

City Dunnellon	State FL	Zip Code 34423	Category/ Type
Purpose of Disbursement: Mileage			

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D280086

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.54		284.16		359.70

C. Full Name (Last, First, Middle Initial)
Ms. Anne O Morgan

Mailing Address
741 W Keller St

City Hernando	State FL	Zip Code 34442-8810	Category/ Type
Purpose of Disbursement: Staff Reimbursement			

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D280216

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
775.15		2916.05		3691.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
775.15		2916.05		3691.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Blue Cross and Blue Shield of Florida

Mailing Address
P.O. Box 2210

City Jacksonville	State FL	Zip Code 32232-5005	Category/ Type
Purpose of Disbursement: Benefits			

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D280220

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

B. Full Name (Last, First, Middle Initial)
Ms. Anne O Morgan

Mailing Address
741 W Keller St

City Hernando	State FL	Zip Code 34442-8810	Category/ Type
Purpose of Disbursement: Mileage			

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
1087162.72

Date / /
Transaction ID: D280227

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.15		546.05		691.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
17019.03	64739.22	81758.25

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SchedL1

NAME OF COMMITTEE (In Full) DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA
NAME OF ACCOUNT NF expenses

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... <small>(Use Schedule L-A)</small>	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	0.00	0.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	6437.91	6437.91
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	0.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	6437.91	6437.91
10. DISBURSEMENTS..... <small>(From Line 6)</small>	0.00	0.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	6437.91	6437.91