

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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

Friends of Connie Mack

ADDRESS (number and street) P.O. Box 519

Check if different than previously reported. (ACC)

Naples FL 34106

2. **FEC IDENTIFICATION NUMBER** C00391243

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

CITY STATE ZIP CODE STATE DISTRICT

FL 14

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on _____ in the State of _____

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

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

Election on _____ in the State of _____

5. Covering Period 08 07 2008 through 09 30 2008

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 Craig Engle

Signature of Treasurer Electronically Filed by Craig Engle Date 10 15 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Connie Mack

Report Covering the Period:

From:

M	M
0	8

D	D
0	7

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	97527.50	1222805.71
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	97527.50	1222605.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	41545.19	725558.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4207.48
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41545.19	721350.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	751921.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Friends of Connie Mack

Report Covering the Period: From:

M	M
0	8

D	D
0	7

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	59805.00	861047.79
(i) Itemized (use Schedule A).....	9489.50	74962.17
(ii) Unitemized.....	69294.50	936009.96
(iii) TOTAL of contributions from individuals..... ▶	98.00	98.00
(b) Political Party Committees.....	28135.00	286697.75
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	97527.50	1222805.71
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	10243.88	10243.88
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	4207.48
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1.00	1.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	107772.38	1237258.07

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41545.19	725558.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	15168.00	15168.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	200.00
21. OTHER DISBURSEMENTS.....	0.00	4100.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	56713.19	745026.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	700861.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	107772.38
25. SUBTOTAL (add Line 23 and Line 24).....	808634.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	56713.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	751921.07

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

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

FOR LINE NUMBER: PAGE 5 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Aircraft Owners & Pilots Assn. PAC

Mailing Address 601 Pennsylvania Ave., NW
Suite 875, South Bldg

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
08 / 21 / 2008

Transaction ID: 80822.C19185

Amount of Each Receipt this Period 1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1120 Connecticut Avenue, N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt MM / DD / YYYY
09 / 30 / 2008

Transaction ID: 81014.C19443

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Arent Fox Civic Participation Fund

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00241380

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
09 / 23 / 2008

Transaction ID: 81014.C19401

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

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

Mailing Address 175 E Houston St # 7-A-50
Attn: Jonathan P. Klug

City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C** c00109017

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
09 / 15 / 2008

Transaction ID: 81014.C19470

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 175 E Houston St # 7-A-50
Attn: Jonathan P. Klug

City San Antonio State TX Zip Code 78205-2255

FEC ID number of contributing federal political committee. **C** c00109017

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

Date of Receipt MM / DD / YYYY
09 / 25 / 2008

Transaction ID: 81014.C19505

Amount of Each Receipt this Period 1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Crowley Maritime Corporation Federal PAC

Mailing Address 575 7th St NW

City Washington State DC Zip Code 20004-1607

FEC ID number of contributing federal political committee. **C** C00147231

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt MM / DD / YYYY
08 / 14 / 2008

Transaction ID: 80815.C19144

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 7 / 74
(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
CTIA PAC

Mailing Address 1400 16th Street, NW
Suite 600

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 8

Transaction ID: 81014.C19438

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Free And Strong American Pac, Inc

Mailing Address 585 Commercial St

City Boston State MA Zip Code 02109-1024

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: 81014.C19250

Amount of Each Receipt this Period
1500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Free And Strong American Pac, Inc

Mailing Address 585 Commercial St

City Boston State MA Zip Code 02109-1024

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3635.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: 81014.C19249

Amount of Each Receipt this Period
635.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3135.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 74			
(check only one)				
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Harris Corp. Federal PAC		Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 1025 W. Nasa Blvd.		Transaction ID: 81014.C19403
	City Melbourne	State FL	Zip Code 32919
	FEC ID number of contributing federal political committee. C C00100321		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation Government Relations	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) National Beer Wholesalers Asso. PAC		Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 1100 King Street, Suite 600		Transaction ID: 81014.C19390
	City Alexandria	State VA	Zip Code 22314
	FEC ID number of contributing federal political committee. C C00144766		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 6000.00	

C.	Full Name (Last, First, Middle Initial) Nat. Rifle Assoc. Political Victory Fun		Date of Receipt MM / DD / YYYY 08 / 21 / 2008
	Mailing Address 11250 Waples Mill Road		Transaction ID: 80822.C19214
	City Fairfax	State VA	Zip Code 22030
	FEC ID number of contributing federal political committee. C C00053553		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
NFIB Safe Trust PAC
Mailing Address 1201 F St NW Ste 200
City Washington State DC Zip Code 20004-1221
FEC ID number of contributing federal political committee. **C** C00101105
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt MM / DD / YYYY 08 / 14 / 2008
Transaction ID: 80815.C19146
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Owner Operator Independent Drivers Assn
Mailing Address 1101 30th Street, NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 4000.00
Date of Receipt MM / DD / YYYY 08 / 14 / 2008
Transaction ID: 80815.C19145
Amount of Each Receipt this Period 2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Parsons Corporation PAC
Mailing Address 1133 Fifteenth Street, NW Suite 800
City Washington State DC Zip Code 20005-2701
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 2000.00
Date of Receipt MM / DD / YYYY 09 / 26 / 2008
Transaction ID: 81014.C19504
Amount of Each Receipt this Period 1000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
PathPac

Mailing Address 1350 I St NW Ste 590
Suite 590

City Washington State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 14 / 2008

Transaction ID: 80815.C19147

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Poker Players Alliance PAC

Mailing Address 1325 G St NW Ste 500
Suite 500

City Washington State DC Zip Code 20005-3136

FEC ID number of contributing federal political committee. C C00448688

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 29 / 2008

Transaction ID: 81014.C19407

Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
PriceWaterhouseCoopers PAC

Mailing Address 1301 K St NW
Suite 800 W

City Washington State DC Zip Code 20005-3307

FEC ID number of contributing federal political committee. C C00107235

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 25 / 2008

Transaction ID: 81014.C19221

Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Realtors Political Action Committee

Mailing Address 430 N. Michigan Avenue

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 0 4 / 2 0 0 8

Transaction ID: 81014.C19248

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
The Spirit of Democratic Capitalism Fund

Mailing Address PO Box 70808

City State Zip Code
Washington DC 20024-0808

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 2 3 / 2 0 0 8

Transaction ID: 81014.C19402

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
United Parcel Service PAC

Mailing Address 316 Pennsylvania Avenue, SE
Suite 300

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 0 9 / 2 0 0 8

Transaction ID: 81014.C19469

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 74
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial) Viacom Pac		Date of Receipt MM / DD / YYYY 09 / 16 / 2008
Mailing Address 1501 M St NW Ste 1100 Suite 1100		Transaction ID: 81014.C19365
City Washington	State DC	Zip Code 20005-1729
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Wachovia Employees Good Govt Fund		Date of Receipt MM / DD / YYYY 08 / 21 / 2008
Mailing Address 301 South College Stret, TW22		Transaction ID: 80822.C19184
City Charlotte	State NC	Zip Code 28288
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	28135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Margaret Allesee</p> <p>Mailing Address 6560 Red Maple Ln</p> <p>City State Zip Code Bloomfield Hills MI 48301-3224</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer n/a Occupation volunteer</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 205.00</p>	<p>Date of Receipt 09 / 29 / 2008</p> <p>Transaction ID: 81014.C19417</p> <p>Amount of Each Receipt this Period 205.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) William G. Allyn</p> <p>Mailing Address 525 Gulf Shore Blvd N</p> <p>City State Zip Code Naples FL 34102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired Occupation retired</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt 09 / 04 / 2008</p> <p>Transaction ID: 81014.C19253</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Ron Bailey</p> <p>Mailing Address 912 W Platt St</p> <p>City State Zip Code Tampa FL 33606-2114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Rattle View Investments Occupation manager</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1500.00</p>	<p>Date of Receipt 09 / 15 / 2008</p> <p>Transaction ID: 81014.C19448</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	905.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Sam Bailey

Mailing Address 3103 N Julia Cir

City Tampa State FL Zip Code 33629-8819

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 941.00

Date of Receipt 09 / 30 / 2008
Transaction ID: 81014.C19454
 Amount of Each Receipt this Period 41.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 165 Blossom Hill Rd

City San Jose State CA Zip Code 95123-5938

FEC ID number of contributing federal political committee. C

Name of Employer Barbaccia Investments Occupation real estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19251
 Amount of Each Receipt this Period 205.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5718 Driftwood Parkway

City Cape Coral State FL Zip Code 33904

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Industrial Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2291.00

Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19281
 Amount of Each Receipt this Period 41.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 287.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Rhodora Barton

Mailing Address c/o The Beechwood Co.
Suite 850

City Pittsburgh State PA Zip Code 15222-3716

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 21 / 2008
Transaction ID: 80822.C19190
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bruce C. Beach, Sr.

Mailing Address 14999 Rivers Edge Ct. Apt 101A

City Fort Myers State FL Zip Code 33908-7943

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

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 09 / 26 / 2008
Transaction ID: 81014.C19501
 Amount of Each Receipt this Period 50.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 17080 Harbour Point, #1212

City Fort Myers State FL Zip Code 33908

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

Name of Employer Hope Hospice Care Occupation President/ CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 541.00

Date of Receipt 08 / 12 / 2008
Transaction ID: 80822.C19203
 Amount of Each Receipt this Period 41.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2091.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Helen Bell		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 1580 Curlew Ave		Transaction ID: 81014.C19430
	City Naples	State FL	Zip Code 34102-3405
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer retired	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Ervin Bickley		Date of Receipt MM / DD / YYYY 09 / 04 / 2008
	Mailing Address 2749 Wulfert Road		Transaction ID: 81014.C19291
	City Sanibel	State FL	Zip Code 33957-2216
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer retired	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) J. M. Bissell		Date of Receipt MM / DD / YYYY 09 / 04 / 2008
	Mailing Address P. O. Box 1340		Transaction ID: 81014.C19315
	City Boca Grande	State FL	Zip Code 33921
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 410.00
	Name of Employer n/a	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 410.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	560.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 74
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Eugenia Blalock</p> <p>Mailing Address PO Box 2551</p> <p>City State Zip Code Palm Desert CA 92261-2551</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">410.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>0</td><td>9</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p>Transaction ID: 81014.C19319</p> <p>Amount of Each Receipt this Period 410.00 </p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	4		2	0	0	8												

<p>B. Full Name (Last, First, Middle Initial) Arthur Bourque</p> <p>Mailing Address 88 Laurie Dr NE</p> <p>City State Zip Code Fort Walton Beach FL 32548-5153</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">200.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>0</td><td>9</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p>Transaction ID: 81014.C19387</p> <p>Amount of Each Receipt this Period 50.00 </p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	8		2	0	0	8												

<p>C. Full Name (Last, First, Middle Initial) Arthur Bourque</p> <p>Mailing Address 88 Laurie Dr NE</p> <p>City State Zip Code Fort Walton Beach FL 32548-5153</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p>Transaction ID: 81014.C19456</p> <p>Amount of Each Receipt this Period 50.00 </p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	0	8												

SUBTOTAL of Receipts This Page (optional)	510.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Lewis J. Boyd</p> <p>Mailing Address 1431 Bishop Road</p> <p>City State Zip Code Merritt Island FL 32953</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation United Space Alliance engineer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">750.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 8</p> <p>Transaction ID: 81014.C19486</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Janice Brinkman</p> <p>Mailing Address 2008 E Imperial Dr</p> <p>City State Zip Code Naples FL 34110-8102</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation none none</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">270.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 8</p> <p>Transaction ID: 81014.C19299</p> <p>Amount of Each Receipt this Period 41.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) David Brown, III</p> <p>Mailing Address 2665 Oak Ridge Ct</p> <p>City State Zip Code Fort Myers FL 33901-9389</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Eye Centers of Florida physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">2300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 8</p> <p>Transaction ID: 81014.C19347</p> <p>Amount of Each Receipt this Period 2300.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2441.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Paul Buma

Mailing Address 5274 Kensington High St

City State Zip Code
Naples FL 34105-5651

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	8

Transaction ID: 81014.C19487

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3655 Woodstork Court

City State Zip Code
Fort Myers FL 33908-4122

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 282.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: 81014.C19306

Amount of Each Receipt this Period
82.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 7075 Highway 1

City State Zip Code
Belle Rose LA 70341-5504

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Livingston Group consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	0	8

Transaction ID: 81014.C19400

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 682.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Larry L. Chamberlin</p> <p>Mailing Address 830 Bentwood Drive</p> <p>City State Zip Code Naples FL 34108</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">205.00</p>	<p>Date of Receipt 08 / 27 / 2008</p> <p>Transaction ID: 81014.C19226</p> <p>Amount of Each Receipt this Period 205.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Brenda Dejong</p> <p>Mailing Address 2201 Canary Island CV</p> <p>City State Zip Code Naples FL 34119</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Stock Development sales</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">450.00</p>	<p>Date of Receipt 08 / 21 / 2008</p> <p>Transaction ID: 80822.C19215</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Anthony DiBiase</p> <p>Mailing Address 550 N Yachtsman Dr</p> <p>City State Zip Code Sanibel FL 33957-3910</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MEV Healthcom, Inc. Medical Publishing</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">200.00</p>	<p>Date of Receipt 08 / 21 / 2008</p> <p>Transaction ID: 80822.C19220</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	555.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Anthony DiBiase

Mailing Address 550 N Yachtsman Dr

City Sanibel State FL Zip Code 33957-3910

FEC ID number of contributing federal political committee. C

Name of Employer MEV Healthcom, Inc. Occupation Medical Publishing

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2008

Transaction ID: 81014.C19399

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Anthony DiBiase

Mailing Address 550 N Yachtsman Dr

City Sanibel State FL Zip Code 33957-3910

FEC ID number of contributing federal political committee. C

Name of Employer MEV Healthcom, Inc. Occupation Medical Publishing

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 09 / 29 / 2008

Transaction ID: 81014.C19422

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
James Dolan

Mailing Address c/o The Beechwood Co.
Suite 850

City Pittsburgh State PA Zip Code 15222-3716

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 04 / 2008

Transaction ID: 81014.C19236

Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Andy Domenigoni

Mailing Address 31851 Winchester Rd

City Winchester State CA Zip Code 92596-9709

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

Name of Employer Self Employed Occupation Farmer/Rancher/Developer

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt: 08 / 27 / 2008
Transaction ID: 81014.C19361
Amount of Each Receipt this Period: 410.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 31851 Winchester Rd

City Winchester State CA Zip Code 92596-9709

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

Name of Employer Self Employed Occupation Farmer/Rancher/Developer

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt: 08 / 27 / 2008
Transaction ID: 81014.C19360
Amount of Each Receipt this Period: 410.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address c/o The Beechwood co. Suite 850

City Pittsburgh State PA Zip Code 15222-3716

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt: 09 / 04 / 2008
Transaction ID: 81014.C19234
Amount of Each Receipt this Period: 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2820.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Frances Donahue

Mailing Address c/o The Beechwood Co.
Suite 850

City Pittsburgh State PA Zip Code 15222-3716

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19232
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kimberly K. Donahue

Mailing Address 2525 Lantern Lane

City Naples State FL Zip Code 34102

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

Name of Employer n/a Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19231
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Rhodora J. Donahue

Mailing Address 100 Bay Road

City Naples State FL Zip Code 34102-7902

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

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19233
 Amount of Each Receipt this Period 2300.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6300.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
William Donahue

Mailing Address c/o The Beechwood Co.
Suite 850, 1001 Liberty Ave

City Pittsburgh State PA Zip Code 15222-3716

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 21 / 2008
Transaction ID: 80822.C19189
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address c/o The Beechwood Co.
Suite 850

City Pittsburgh State PA Zip Code 15222-3716

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19235
 Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 107 Hampton Road

City Clearwater State FL Zip Code 33759

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

Name of Employer Provident Companies Occupation president

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt 09 / 15 / 2008
Transaction ID: 81014.C19468
 Amount of Each Receipt this Period 1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 5000.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Charles Dudley
 Mailing Address 534 Bobbin Brook Lane
 City State Zip Code
 Tallahassee FL 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Barreto Cunningham May Occupation lobbyist
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 1000.00
 Date of Receipt: 09 / 04 / 2008
Transaction ID: 81014.C19230
 Amount of Each Receipt this Period: 1000.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Susan H. Earl
 Mailing Address 945 Wedge Drive
 City State Zip Code
 Naples FL 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 200.00
 Date of Receipt: 09 / 04 / 2008
Transaction ID: 81014.C19284
 Amount of Each Receipt this Period: 100.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
H. Phelps Edwards Jr
 Mailing Address 170 Amblewood Ln
 City State Zip Code
 Naples FL 34105-7147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Amount: 200.00
 Date of Receipt: 09 / 04 / 2008
Transaction ID: 81014.C19297
 Amount of Each Receipt this Period: 100.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **1200.00**
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Katherine Freyvogel

Mailing Address c/o The Beechwood Co.
Suite 850

City Pittsburgh State PA Zip Code 15222-3716

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 21 / 2008

Transaction ID: 80822.C19194

Amount of Each Receipt this Period 2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4901 SW 8th Ct

City Cape Coral State FL Zip Code 33914-7359

FEC ID number of contributing federal political committee. C

Name of Employer CSSI, LLC Occupation consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 21 / 2008

Transaction ID: 80822.C19219

Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1370 Cutler Ct.

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2008

Transaction ID: 81014.C19344

Amount of Each Receipt this Period 250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Robert W. Garthwaite
 Mailing Address P. O. Box 1367, Sharon Road
 City Waterbury State CT Zip Code 06721
 Date of Receipt 08 / 11 / 2008
 Transaction ID: 80822.C19201
 Amount of Each Receipt this Period 250.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Name of Employer Cly Del Manufacturing Co. Occupation chairman
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) 250.00

B. Full Name (Last, First, Middle Initial)
James Greenbaum
 Mailing Address 4 Big Sioux Rd
 City Rancho Mirage State CA Zip Code 92270-2311
 Date of Receipt 09 / 29 / 2008
 Transaction ID: 81014.C19420
 Amount of Each Receipt this Period 500.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Name of Employer retired Occupation retired
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) 500.00

C. Full Name (Last, First, Middle Initial)
Kenneth Hartmann
 Mailing Address 525 E Magnolia Blvd Apt C #C
 City Burbank State CA Zip Code 91501-1947
 Date of Receipt 08 / 15 / 2008
 Transaction ID: 80822.C19178
 Amount of Each Receipt this Period 500.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 Name of Employer retired Occupation retired
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 74
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Mary Heckmann
 Mailing Address PO Box 2165
 City State Zip Code
 La Jolla CA 92038-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 0 1 / 2 0 0 8
Transaction ID: 81014.C19358
 Amount of Each Receipt this Period
 205.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James Houston
 Mailing Address 345 N Via Las Palmas
 City State Zip Code
 Palm Springs CA 92262-4292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation businessman
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 820.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 0 4 / 2 0 0 8
Transaction ID: 81014.C19322
 Amount of Each Receipt this Period
 820.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hubert Hudson
 Mailing Address 260 Oak Hill
 City State Zip Code
 Watsonville CA 95076-0550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 2 9 / 2 0 0 8
Transaction ID: 81014.C19416
 Amount of Each Receipt this Period
 200.00
 Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1225.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Thomas James

Mailing Address 9341 Silverthorn

City State Zip Code
Largo FL 33777

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

Name of Employer Occupation
Raymond James Financial CEO

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: 81014.C19293

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Marvin Kahn

Mailing Address P. O. Box 3346

City State Zip Code
Sebring FL 33871

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

Name of Employer Occupation
Kahn Grove Suc Co Citrus Grower

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 14 / 2008

Transaction ID: 80815.C19148

Amount of Each Receipt this Period

150.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Stephen Keller

Mailing Address 777 Bayshore Drive, #1506

City State Zip Code
Fort Lauderdale FL 33304

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

Name of Employer Occupation
n/a retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: 81014.C19457

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

900.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Jerome King
Mailing Address 589 Kinzie Island Ct
City Sanibel State FL Zip Code 33957-5021
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY
09 / 23 / 2008
Transaction ID: 81014.C19404
Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
Jim Kinsey, Jr.
Mailing Address PO Box 1662
City Fort Myers State FL Zip Code 33902-1662
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY
09 / 22 / 2008
Transaction ID: 81014.C19398
Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Kinsey Associates, Inc Occupation Real Estate Brokerage/Dev.
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

C. Full Name (Last, First, Middle Initial)
David Klose
Mailing Address PO Box 11185
City Palm Desert State CA Zip Code 92255-1185
FEC ID number of contributing federal political committee. **C**

Date of Receipt MM / DD / YYYY
09 / 29 / 2008
Transaction ID: 81014.C19423
Amount of Each Receipt this Period 205.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer retired Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

SUBTOTAL of Receipts This Page (optional) 1205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 74

(check only one)

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

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)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Lisa Korbатов

Mailing Address 624 N Rodeo Dr

City State Zip Code
Beverly Hills CA 90210-3208

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Transaction ID: 81014.C19436

Amount of Each Receipt this Period 500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Gerald Laboda

Mailing Address 9904 Bellagio Ct.

City State Zip Code
Fort Myers FL 33913

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

SW FL Oral & Facial Surgery
doctor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 791.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: 81014.C19307

Amount of Each Receipt this Period 41.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Sheila Laboda

Mailing Address 9904 Bellagio Ct.

City State Zip Code
Fort Myers FL 33913

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Royal Palm Travel
travel consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 791.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: 81014.C19308

Amount of Each Receipt this Period 41.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 582.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 74
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Cynthia Lyster

Mailing Address 5931 Barclay Ln

City State Zip Code
Naples FL 34110-7306

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

Name of Employer Occupation
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 910.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 29 / 2008

Transaction ID: 81014.C19414

Amount of Each Receipt this Period

410.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Edward P. Mc Namara

Mailing Address 6620 George Washington Way

City State Zip Code
Naples FL 34108

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

Name of Employer Occupation
Costal Beverage, Ltd. chairman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 19 / 2008

Transaction ID: 80819.C19152

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Dennis McGillicuddy

Mailing Address 1 Snapper Lane

City State Zip Code
Falmouth MA 02540

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

Name of Employer Occupation
Woods Hole scientist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 13 / 2008

Transaction ID: 81014.C19481

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1510.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 74
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Ellsworth McIntyre

Mailing Address 3590 23rd Ave SW

City Naples State FL Zip Code 34117-6648

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

Name of Employer Grace Community Day Care- School Occupation Pastor

Receipt For: 2008 Election Cycle-to-Date Primary General Other (specify) 2000.00

Date of Receipt 09 / 24 / 2008

Transaction ID: 81014.C19439

Amount of Each Receipt this Period 1000.00

Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Julianne C. McKeel

Mailing Address 3106 Sunset Drive

City Tampa State FL Zip Code 33629

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

Name of Employer Homemaker Occupation homemaker

Receipt For: 2008 Election Cycle-to-Date Primary General Other (specify) 525.00

Date of Receipt 09 / 12 / 2008

Transaction ID: 81014.C19493

Amount of Each Receipt this Period 100.00

Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 878 N.W. 10th Street

City Homestead State FL Zip Code 33030

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

Name of Employer McLeans Homestead Florist Occupation retail florist

Receipt For: 2008 Election Cycle-to-Date Primary General Other (specify) 200.00

Date of Receipt 09 / 04 / 2008

Transaction ID: 81014.C19279

Amount of Each Receipt this Period 50.00

Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **1150.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Kathryn L. McMichael

Mailing Address 4121 Lorene Drive
Unit 302

City Estero State FL Zip Code 33928

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 259.00

Date of Receipt 08 / 15 / 2008
Transaction ID: 80822.C19173

Amount of Each Receipt this Period 41.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 182 Tullamore Rd

City Garden City State NY Zip Code 11530-1152

FEC ID number of contributing federal political committee. C

Name of Employer Bee Realty Et Al Occupation attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 08 / 21 / 2008
Transaction ID: 80822.C19216

Amount of Each Receipt this Period 200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 15188 Fiddlesticks Blvd

City Fort Myers State FL Zip Code 33912-2437

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 08 / 11 / 2008
Transaction ID: 80822.C19206

Amount of Each Receipt this Period 100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 341.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Carol Moore</p> <p>Mailing Address PO Box 276</p> <p>City State Zip Code Wayne PA 19087-0276</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 08 / 21 / 2008</p> <p>Transaction ID: 80822.C19192</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Patrick Moore</p> <p>Mailing Address PO Box 276A</p> <p>City State Zip Code Wayne PA 19087-0276</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 08 / 21 / 2008</p> <p>Transaction ID: 80822.C19193</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Patricia Murdock</p> <p>Mailing Address 100 Worth Avenue #705</p> <p>City State Zip Code Palm Beach FL 33480</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired Occupation retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 632.00</p>	<p>Date of Receipt 08 / 12 / 2008</p> <p>Transaction ID: 80822.C19195</p> <p>Amount of Each Receipt this Period 82.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2082.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
James T. Murphy
Mailing Address 1150 Central Avenue
City Naples State FL Zip Code 34102
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2008.00
Date of Receipt 08 / 21 / 2008
Transaction ID: 80822.C19191
Amount of Each Receipt this Period 2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Maureen D. Murphy
Mailing Address 3980 Gordon Drive
City Naples State FL Zip Code 33940
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2008.00
Date of Receipt 08 / 21 / 2008
Transaction ID: 80822.C19187
Amount of Each Receipt this Period 2000.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Peter Murphy
Mailing Address 78154 San Timoteo St
City La Quinta State CA Zip Code 92253-6218
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 09 / 04 / 2008
Transaction ID: 81014.C19277
Amount of Each Receipt this Period 500.00
Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Robert OConnor

Mailing Address 13890 McGregor Blvd

City State Zip Code
Fort Myers FL 33919-6150

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: 81014.C19392

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Richard OLinn

Mailing Address 1025 S Palm Canyon Dr

City State Zip Code
Palm Springs CA 92264-8378

FEC ID number of contributing federal political committee. C

Name of Employer OLinn Enterprises Occupation president

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

410.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2008

Transaction ID: 80822.C19181

Amount of Each Receipt this Period
410.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Viola Panman

Mailing Address 1152 Calle Maria

City State Zip Code
San Marcos CA 92069-2103

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

235.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 01 / 2008

Transaction ID: 81014.C19225

Amount of Each Receipt this Period
25.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1435.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 74
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	15
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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Dianne Pellissier

Mailing Address 15278 El Soneto Dr

City State Zip Code
Whittier CA 90605-1645

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 410.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: 81014.C19409

Amount of Each Receipt this Period
410.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Leigh Perkins

Mailing Address 5097 Westlake Road

City State Zip Code
Monticello FL 32344

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: 81014.C19355

Amount of Each Receipt this Period
200.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Susan Petnuch

Mailing Address c/o the Beechwood Co.
Suite 850 1001 Liberty Ave

City State Zip Code
Pittsburgh PA 15222-3716

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 1 / 2 0 0 8

Transaction ID: 80822.C19188

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2610.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Gordon Pierce		Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address 236 Morton Ln		Transaction ID: 81014.C19334
	City Winter Springs	State FL	Zip Code 32708-3607
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer retired	Occupation retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 375.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Robert Potamkin		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 1100 Black Birch Dr		Transaction ID: 81014.C19222
	City Aspen	State CO	Zip Code 81611-1004
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Information Requested	Occupation Information Requested	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

C.	Full Name (Last, First, Middle Initial) Peter Powers		Date of Receipt MM / DD / YYYY 08 / 21 / 2008
	Mailing Address 353 Lexington Ave Floor		Transaction ID: 80822.C19218
	City New York	State NY	Zip Code 10016-0941
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Powers Global Strategies, LLC	Occupation consultant	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
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SUBTOTAL of Receipts This Page (optional)	2050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
William Powers

Mailing Address 77340 Black Mountain Trl

City State Zip Code
Indian Wells CA 92210-9185

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

Name of Employer Occupation
Pacific Western Bank banker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2008

Transaction ID: 81014.C19362

Amount of Each Receipt this Period
205.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert Ratliff III

Mailing Address PO Box 566

City State Zip Code
Sanibel FL 33957-0566

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

Name of Employer Occupation
Self Employed real estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2008

Transaction ID: 81014.C19455

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas J. Rice

Mailing Address 13130 Placida Point Court

City State Zip Code
Placida FL 33946

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

Name of Employer Occupation
HCA hospital administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 07 / 2008

Transaction ID: 81014.C19375

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **555.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Godfrey Rockefeller

Mailing Address 401 E. Linton Ave

City State Zip Code
Delray Beach FL 33483

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

Name of Employer Occupation
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: 81014.C19296

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period: 400.00

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

Mailing Address 2635 Forest Circle

City State Zip Code
Jacksonville FL 32257

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

Name of Employer Occupation
Vestcor chairman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81014.C19229

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Herbert J. Rowe

Mailing Address 4601 Gulf Shore Blvd N Apt 12
Apt. 12

City State Zip Code
Naples FL 34103-2214

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

Name of Employer Occupation
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: 81014.C19433

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period: 3718.00

SUBTOTAL of Receipts This Page (optional) ► **1200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Sam Saad, III

Mailing Address 1719 Venezia Way

City State Zip Code
Naples FL 34105

FEC ID number of contributing federal political committee. C

Name of Employer Sam Saad Associates Occupation executive

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1000.00

Date of Receipt M M / D D / Y Y Y Y
09 / 23 / 2008

Transaction ID: 81014.C19442

Amount of Each Receipt this Period 500.00

Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Robert Schneebeck

Mailing Address 741 N Manasota Key Rd

City State Zip Code
Englewood FL 34223-9758

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

200.00

Date of Receipt M M / D D / Y Y Y Y
08 / 18 / 2008

Transaction ID: 80822.C19212

Amount of Each Receipt this Period 200.00

Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Robert F. Schwindt

Mailing Address 1001 Arbor Lake Drive #1608

City State Zip Code
Naples FL 34110

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

882.00

Date of Receipt M M / D D / Y Y Y Y
08 / 12 / 2008

Transaction ID: 80822.C19165

Amount of Each Receipt this Period 82.00

Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 782.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Robert F. Schwindt</p> <p>Mailing Address 1001 Arbor Lake Drive #1608</p> <p>City State Zip Code Naples FL 34110</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation retired retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">982.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8</p> <p>Transaction ID: 81014.C19386</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Richard Shanahan</p> <p>Mailing Address 427 Barcelona Court</p> <p>City State Zip Code Marco Island FL 34145</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation WCI Realty realtor</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">691.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 8</p> <p>Transaction ID: 81014.C19282</p> <p>Amount of Each Receipt this Period 41.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) James Shine</p> <p>Mailing Address 1417 Wedgeworth Road</p> <p>City State Zip Code Belle Glade FL 33430</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Sugar Cane Growers Corporation scientist</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 8</p> <p>Transaction ID: 81014.C19485</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	241.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Brien Spina</p> <p>Mailing Address 599 S Collier Blvd</p> <p>City State Zip Code Marco Island FL 34145-5512</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Employed Restaurant owner</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8</p> <p>Transaction ID: 81014.C19328</p> <p>Amount of Each Receipt this Period 400.00</p> <p>In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Thomas Staed</p> <p>Mailing Address 2001 S. Atlantic Avenue</p> <p>City State Zip Code Daytona Beach Shor FL 32118</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation self-employed hotelier</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">985.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 8</p> <p>Transaction ID: 81014.C19310</p> <p>Amount of Each Receipt this Period 205.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Edward Steinberg</p> <p>Mailing Address 100 Sunrise Ave Apt 311</p> <p>City State Zip Code Palm Beach FL 33480-3939</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation SDA Enterprises Inc. vice chairman</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">241.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 8</p> <p>Transaction ID: 81014.C19450</p> <p>Amount of Each Receipt this Period 41.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	646.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Gloria Stroschein</p> <p>Mailing Address PO Box 1030</p> <p>City State Zip Code Blythe CA 92226-1030</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Information Requested Occupation Information Requested</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 410.00</p>	<p>Date of Receipt 09 / 04 / 2008</p> <p>Transaction ID: 81014.C19241</p> <p>Amount of Each Receipt this Period 410.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Patricia Swindle</p> <p>Mailing Address 137 Clarke Ave</p> <p>City State Zip Code Palm Beach FL 33480-6122</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Homemaker Occupation homemaker</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt 09 / 04 / 2008</p> <p>Transaction ID: 81014.C19309</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Stanley Tate</p> <p>Mailing Address 1175 N.E. 125th Street, #102</p> <p>City State Zip Code Miami FL 33161</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self-employed Occupation developer</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1450.00</p>	<p>Date of Receipt 08 / 21 / 2008</p> <p>Transaction ID: 80822.C19155</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	710.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Stanley Tate

Mailing Address 1175 N.E. 125th Street, #102

City State Zip Code
Miami FL 33161

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

Name of Employer self-employed Occupation
developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1050.00

Transaction ID: 80822.C19154

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3580 Gin Ln

City State Zip Code
Naples FL 34102-7815

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

Name of Employer Self Employed Occupation
investments

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81014.C19405

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3580 Gin Ln

City State Zip Code
Naples FL 34102-7815

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

Name of Employer Information Requested Occupation
Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81014.C19406

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **3050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

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

Mailing Address 688 Parkview Lane

City State Zip Code
Naples FL 34103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Coastal Beverage, Ltd. president

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
08 / 19 / 2008

Transaction ID: 80819.C19151

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 970

City State Zip Code
Thousand Palms CA 92276-0970

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Chaney Construction Office

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 205.00

Date of Receipt MM / DD / YYYY
09 / 04 / 2008

Transaction ID: 81014.C19257

Amount of Each Receipt this Period
205.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 125 Gulf Shore Blvd N

City State Zip Code
Naples FL 34102-5933

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
09 / 28 / 2008

Transaction ID: 81014.C19503

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 955.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 74
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Randy White	Date of Receipt MM / DD / YYYY 09 / 14 / 2008
	Mailing Address PO Box 486	Transaction ID: 81014.C19349
	City Pineland State FL Zip Code 33945	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Employed	Occupation Author	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

B.	Full Name (Last, First, Middle Initial) James Willingham	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 45695 Sugarloaf Mountain Trl	Transaction ID: 81014.C19465
	City Indian Wells State CA Zip Code 92210-9180	Amount of Each Receipt this Period 205.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 205.00	

C.	Full Name (Last, First, Middle Initial) Duane Young	Date of Receipt MM / DD / YYYY 09 / 04 / 2008
	Mailing Address 41480 Yucca Ln	Transaction ID: 81014.C19260
	City Bermuda Dunes State CA Zip Code 92203-8128	Amount of Each Receipt this Period 820.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Cocopah Nurseries	Occupation agriculture	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 820.00	

SUBTOTAL of Receipts This Page (optional)	▶	2025.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 49 / 74

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Jovan Zepcevski

Mailing Address 7802 Jean Blvd.

City State Zip Code
Fort Myers FL 33912

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

Name of Employer
Zep Construction, Inc.

Occupation
Marine Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2750.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2008

Transaction ID: 81014.C19342

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Robert Zimmerman

Mailing Address 2422 Terra Verde Lane

City State Zip Code
Naples FL 34105-3035

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

Name of Employer
retired

Occupation
retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
850.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: 81014.C19294

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

59805.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 74

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City	State	Zip Code
Washington	DC	20003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
98.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 13 / 2008

Transaction ID: 81014.C19510

Amount of Each Receipt this Period

98.00

In-Kind

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

98.00

TOTAL This Period (last page this line number only)

98.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 74
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Mack-Feeney Victory Fund

Mailing Address PO Box 65067

City Washington State DC Zip Code 20035-5067

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10243.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: 81014.C19506

Amount of Each Receipt this Period
10243.88

Transfers From Affil./Auth.
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	10243.88
TOTAL This Period (last page this line number only)	▶	10243.88

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

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

FOR LINE NUMBER: (check only one)

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

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)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Collier Co Rep Executive Committee

Transaction ID: 81014.E4348

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Mailing Address P. O. Box 7367

Amount of Each Disbursement this Period

890.00

City State Zip Code
Naples FL 34101-

Purpose of Disbursement
Golf Outing/Banner Sponsorship

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

GOLF OUTING/BANNER SPONSORSHIP

State: District:

B.

Full Name (Last, First, Middle Initial)
Arthur J. Finkelstein & Assoc.

Transaction ID: 81014.E4341

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Mailing Address 16 N. Astor Street

Amount of Each Disbursement this Period

2000.00

City State Zip Code
Irvington NY 10533-

Purpose of Disbursement
Political Consulting Fee

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

POLITICAL CONSULTING FEE

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Rob Jennings

Transaction ID: 81014.E4339

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

Mailing Address American Event Consulting, Inc.
501 L St NW

Amount of Each Disbursement this Period

1000.00

City State Zip Code
Washington DC 20001-

Purpose of Disbursement
fundraising consulting fee

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING CONSULTING FEE

State: District:

SUBTOTAL of Disbursements This Page (optional)

3890.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Mr. Patrick McQuillan

Mailing Address 732 N Cleveland St

City Arlington State VA Zip Code 22201-1912

Purpose of Disbursement fundraising consulting fee
Candidate Name

Category/Type

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

Transaction ID: 81014.E4340
Date of Disbursement

MM / DD / YYYY
09 / 09 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

FUNDRAISING CONSULTING FEE

B.

Full Name (Last, First, Middle Initial)
Brien Spina

Mailing Address 599 S Collier Blvd

City Marco Island State FL Zip Code 34145-5512

Purpose of Disbursement
Candidate Name

Category/Type

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

Transaction ID: 81014.C19328IK
Date of Disbursement

MM / DD / YYYY
09 / 08 / 2008

Amount of Each Disbursement this Period

400.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

IN KIND:

C.

Full Name (Last, First, Middle Initial)
Florida Business Information, Inc.

Mailing Address PO Box 193

City Bell State FL Zip Code 32619-

Purpose of Disbursement newspaper clipping service
Candidate Name

Category/Type

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

Transaction ID: 81014.E4345
Date of Disbursement

MM / DD / YYYY
09 / 09 / 2008

Amount of Each Disbursement this Period

130.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

NEWSPAPER CLIPPING SERVICE

SUBTOTAL of Disbursements This Page (optional) ▶

2530.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Edonation 1 Account Mailing Address 118 N Saint Asaph St City Alexandria State VA Zip Code 22314-3110 Purpose of Disbursement fundraising fee 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: 80822.E4337 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 173.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING FEE
B.	Full Name (Last, First, Middle Initial) Edonation 1 Account Mailing Address 118 N Saint Asaph St City Alexandria State VA Zip Code 22314-3110 Purpose of Disbursement fundraising fee 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: 81014.E4402 Date of Disbursement 09 / 22 / 2008 Amount of Each Disbursement this Period 181.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING FEE
C.	Full Name (Last, First, Middle Initial) Edonation 1 Account Mailing Address 118 N Saint Asaph St City Alexandria State VA Zip Code 22314-3110 Purpose of Disbursement fundraising fee 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: 81014.E4406 Date of Disbursement 09 / 29 / 2008 Amount of Each Disbursement this Period 217.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING FEE

SUBTOTAL of Disbursements This Page (optional) ▶	572.44
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
Business Card (formerly Platinum Plus)

Mailing Address PO Box 15710

City Wilmington State DE Zip Code 19886-5710

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4400

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

20.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CREDIT CARD FEE

B. Full Name (Last, First, Middle Initial)
Stan Lindsey Photography, Inc

Mailing Address 4985 Tallowood Way

City Naples State FL Zip Code 34116-

Purpose of Disbursement
Photography Service Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4347

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

413.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PHOTOGRAPHY SERVICE FEE

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

Mailing Address P. O. Box 360002

City Fort Lauderdale State FL Zip Code 33336-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4349

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

14025.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

14458.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Avis Rent-A-Car

Mailing Address 6 Sylvan Way

City Parsippany State NJ Zip Code 07054-

Purpose of Disbursement
car rental

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4362

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

301.37

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CAR RENTAL

B.

Full Name (Last, First, Middle Initial)
Bullfeathers

Mailing Address 410 1st Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4372

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

32.03

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

C.

Full Name (Last, First, Middle Initial)
Costco

Mailing Address 7171 Cypress Lake Drive

City Fort Myers State FL Zip Code 33907-

Purpose of Disbursement
event supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4393

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

161.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Hilton Naples & Towers

Mailing Address 5111 Tamiami Trail, N.

City Naples State FL Zip Code 34103-

Purpose of Disbursement
travel expense- lodging

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81014.E4363
Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

139.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE- LODGING

B.

Full Name (Last, First, Middle Initial)
LaPlaya Beach & Golf Resort

Mailing Address 9891 Gulf Shore Drive

City Naples State FL Zip Code 34108-

Purpose of Disbursement
Fundraising Expense- lodging

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81014.E4396
Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

179.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FUNDRAISING EXPENSE- LODGING

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 3301 Jefferson Davis Highway

City Alexandria State VA Zip Code 22305-

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81014.E4371
Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

62.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Publix	Transaction ID: 81014.E4389 Date of Disbursement 09 / 09 / 2008
	Mailing Address Colonial Crossings	Amount of Each Disbursement this Period 10.16
	City Ft. Myers State FL Zip Code	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	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) Handsome Harrys	Transaction ID: 81014.E4361 Date of Disbursement 09 / 09 / 2008
	Mailing Address 1207 3rd Street S.	Amount of Each Disbursement this Period 258.65
	City Naples State FL Zip Code 34120-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement meals	[MEMO ITEM] MEMO: MEALS
	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) Handsome Harrys	Transaction ID: 81014.E4391 Date of Disbursement 09 / 09 / 2008
	Mailing Address 1207 3rd Street S.	Amount of Each Disbursement this Period 33.00
	City Naples State FL Zip Code 34120-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement meals	[MEMO ITEM] MEMO: MEALS
	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)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
Handsome Harrys

Mailing Address 1207 3rd Street S.

City Naples State FL Zip Code 34120-

Purpose of Disbursement
meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4360

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

40.92

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: MEALS

B.

Full Name (Last, First, Middle Initial)
Simulscribe Inc

Mailing Address 34 Broad Street

City Red Bank State NJ Zip Code 07701-

Purpose of Disbursement
messaging services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4374

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

29.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: MESSAGING SERVICES

C.

Full Name (Last, First, Middle Initial)
Simulscribe Inc

Mailing Address 34 Broad Street

City Red Bank State NJ Zip Code 07701-

Purpose of Disbursement
messaging service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81014.E4367

Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

29.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: MESSAGING SERVICE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) All Road Communications	Transaction ID: 81014.E4384 Date of Disbursement 09 / 09 / 2008
	Mailing Address 2222 4th Ave Ste A	Amount of Each Disbursement this Period 558.63
	City San Diego State CA Zip Code 92101-2112	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Satellite Telephone Rental Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: SATELLITE TELEPHONE RENTAL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) AT&T Wireless	Transaction ID: 81014.E4351 Date of Disbursement 09 / 09 / 2008
	Mailing Address P. O. Box 8229	Amount of Each Disbursement this Period 105.99
	City Aurora State IL Zip Code 60572-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: TELEPHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) AT&T Wireless	Transaction ID: 81014.E4370 Date of Disbursement 09 / 09 / 2008
	Mailing Address P. O. Box 8229	Amount of Each Disbursement this Period 124.54
	City Aurora State IL Zip Code 60572-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] MEMO: TELEPHONE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) AT&T- Cingular Wireless	Transaction ID: 81014.E4382
	Mailing Address PO Box 31488	Date of Disbursement 09 / 09 / 2008
	City Tampa State FL Zip Code 33631-3488	Amount of Each Disbursement this Period 583.47
	Purpose of Disbursement telephone service	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: TELEPHONE SERVICE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) AT&T- Cingular Wireless	Transaction ID: 81014.E4364
	Mailing Address PO Box 31488	Date of Disbursement 09 / 09 / 2008
	City Tampa State FL Zip Code 33631-3488	Amount of Each Disbursement this Period 40.04
	Purpose of Disbursement telephone service	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: TELEPHONE SERVICE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Alice Sweetwaters	Transaction ID: 81014.E4390
	Mailing Address 1996 Airport Road, S	Date of Disbursement 09 / 09 / 2008
	City Naples State FL Zip Code 34112-	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] MEMO: MEALS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Bonita Springs Self Storage <hr/> Mailing Address 8953 Terrene Court <hr/> City Bonita Springs State FL Zip Code 34135- <hr/> Purpose of Disbursement storage 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: 81014.E4394 Date of Disbursement 09 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 157.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: STORAGE
B.	Full Name (Last, First, Middle Initial) CVS Pharmacy <hr/> Mailing Address 294 9th Street, S <hr/> City Naples State FL Zip Code 34104- <hr/> Purpose of Disbursement event supplies 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: 81014.E4395 Date of Disbursement 09 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 22.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: EVENT SUPPLIES
C.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 First Street, S.E. <hr/> City Washington State DC Zip Code 20003- <hr/> Purpose of Disbursement Fundraising Expense- Event 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: 81014.E4368 Date of Disbursement 09 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 689.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: FUNDRAISING EXPENSE-EVENT

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Embassy Suites- Estero	Transaction ID: 81014.E4383 Date of Disbursement 09 / 09 / 2008
	Mailing Address 10450 Corkscrew Commons Dr	Amount of Each Disbursement this Period 1058.20
	City Estero State FL Zip Code 33928-9423	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Expense- lodging	[MEMO ITEM] MEMO: FUNDRAISING EXPENSE-LODGING
	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) FedEx	Transaction ID: 81014.E4379 Date of Disbursement 09 / 09 / 2008
	Mailing Address P. O. Box 1140	Amount of Each Disbursement this Period 6.71
	City Memphis State TN Zip Code 38101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement express mail delivery	[MEMO ITEM] MEMO: EXPRESS MAIL DELIVE-RTY
	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) FedEx	Transaction ID: 81014.E4380 Date of Disbursement 09 / 09 / 2008
	Mailing Address P. O. Box 1140	Amount of Each Disbursement this Period 8.15
	City Memphis State TN Zip Code 38101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement express mail delivery	[MEMO ITEM] MEMO: EXPRESS MAIL DELIVE-RTY
	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) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: 81014.E4386
Date of Disbursement

Mailing Address P. O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

City Memphis State TN Zip Code 38101-

Amount of Each Disbursement this Period

25.89

Purpose of Disbursement
express mail delivery

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]

MEMO: EXPRESS MAIL DELIVE-
RY

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: 81014.E4387
Date of Disbursement

Mailing Address P. O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

City Memphis State TN Zip Code 38101-

Amount of Each Disbursement this Period

25.89

Purpose of Disbursement
express mail delivery

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]

MEMO: EXPRESS MAIL DELIVE-
RY

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: 81014.E4385
Date of Disbursement

Mailing Address P. O. Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

City Memphis State TN Zip Code 38101-

Amount of Each Disbursement this Period

21.65

Purpose of Disbursement
express mail delivery

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]

MEMO: EXPRESS MAIL DELIVE-
RY

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Pelican Marsh Golf Club	Transaction ID: 81014.E4359
	Mailing Address 1810 Persimmon Dr	Date of Disbursement 09 / 09 / 2008
	City Naples State FL Zip Code 34109-0308	Amount of Each Disbursement this Period 2001.00
	Purpose of Disbursement Event Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼
		[MEMO ITEM] MEMO: EVENT EXPENSE

B.	Full Name (Last, First, Middle Initial) Pelican Marsh Golf Club	Transaction ID: 81014.E4388
	Mailing Address 1810 Persimmon Dr	Date of Disbursement 09 / 09 / 2008
	City Naples State FL Zip Code 34109-0308	Amount of Each Disbursement this Period 99.90
	Purpose of Disbursement meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼
		[MEMO ITEM] MEMO: MEALS

C.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 81014.E4357
	Mailing Address 7 Park Center	Date of Disbursement 09 / 09 / 2008
	City Pittsburgh State PA Zip Code 15220-	Amount of Each Disbursement this Period 1263.00
	Purpose of Disbursement travel expense- airline ticket	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼
		[MEMO ITEM] MEMO: TRAVEL EXPENSE- AIR-LINE TICKET

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 7 Park Center

City Pittsburgh State PA Zip Code 15220-

Purpose of Disbursement
travel expense

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81014.E4378
Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

25.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL EXPENSE

B.

Full Name (Last, First, Middle Initial)
Alis Pizza

Mailing Address 1382 E Capitol St NE

City Washington State DC Zip Code 20003-1533

Purpose of Disbursement
meals

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81014.E4369
Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

63.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS

C.

Full Name (Last, First, Middle Initial)
Tommy Bahama Cafe

Mailing Address 1220 3rd St S

City Naples State FL Zip Code 34102-7202

Purpose of Disbursement
Fundraising Expense- Event

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 81014.E4376
Date of Disbursement

09 / 09 / 2008

Amount of Each Disbursement this Period

139.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FUNDRAISING EXPENSE-EVENT

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 67 / 74

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) Tommy Bahama Cafe</p> <p>Mailing Address 1220 3rd St S</p> <p>City Naples State FL Zip Code 34102-7202</p> <p>Purpose of Disbursement Fundraising Expense- Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81014.E4377</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1013.02"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: FUNDRAISING EXPENSE-EVENT</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 131 North Court House Rd</p> <p>City Arlington State VA Zip Code 22201-</p> <p>Purpose of Disbursement cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81014.E4381</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.07"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: CELL PHONE</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 131 North Court House Rd</p> <p>City Arlington State VA Zip Code 22201-</p> <p>Purpose of Disbursement cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81014.E4373</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="114.91"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: CELL PHONE</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A. Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address 4333 Amon Carter Blvd</p> <p>City Fort Worth State TX Zip Code 76155-</p> <p>Purpose of Disbursement travel expense- airline ticket</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: 81014.E4352 Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 135.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: TRAVEL EXPENSE- AIR-LINE TICKET</p>
<p>B. Full Name (Last, First, Middle Initial) Southwest Florida International Airport</p> <p>Mailing Address 11000 Terminal Access Rd Ste 8671S Suite 8671</p> <p>City Fort Myers State FL Zip Code 33913-8209</p> <p>Purpose of Disbursement parking</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: 81014.E4353 Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 90.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: PARKING</p>
<p>C. Full Name (Last, First, Middle Initial) Arent Fox LLP</p> <p>Mailing Address 1050 Connecticut Ave NW</p> <p>City Washington State DC Zip Code 20036-5308</p> <p>Purpose of Disbursement accounting legal and admin fees</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: 81014.E4343 Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 4316.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>ACCOUNTING LEGAL AND ADMIN FEES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4316.42

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AT&T- Cingular Wireless</p> <p>Mailing Address PO Box 31488</p> <p>City Tampa State FL Zip Code 33631-3488</p> <p>Purpose of Disbursement cell phone service</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: 81014.E4338</p> <p>Date of Disbursement 09 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 533.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CELL PHONE SERVICE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address PO Box 15153</p> <p>City Wilmington State DE Zip Code 19886-5153</p> <p>Purpose of Disbursement CREDIT CARD: SEE BELOW</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: 81014.E4397</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 22.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>CREDIT CARD: SEE BELOW</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address PO Box 15153</p> <p>City Wilmington State DE Zip Code 19886-5153</p> <p>Purpose of Disbursement credit card 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: 81014.E4398</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 5.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] MEMO: CREDIT CARD FEE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

556.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jivaldi LLC</p> <p>Mailing Address 707 MOUNT ERRIGAL PI</p> <p>City Lincoln State CA Zip Code 95648-</p> <p>Purpose of Disbursement website service fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81014.E4401</p> <p>Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1600.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>WEBSITE SERVICE FEES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jivaldi LLC</p> <p>Mailing Address 707 MOUNT ERRIGAL PI</p> <p>City Lincoln State CA Zip Code 95648-</p> <p>Purpose of Disbursement website service fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81014.E4403</p> <p>Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1068.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>WEBSITE SERVICE FEE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Line 1 Communications</p> <p>Mailing Address 3400 BIRCHWOOD MANOR</p> <p>City Tallahassee State FL Zip Code 32312-</p> <p>Purpose of Disbursement fax/email services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81014.E4344</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2946.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>FAX/EMAIL SERVICES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5615.39

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) SCM Associates, Inc.	Transaction ID: 81014.E4342 Date of Disbursement 09 / 09 / 2008
	Mailing Address 1283 Main Street PO Box 254	Amount of Each Disbursement this Period 9150.46
	City Dublin State NH Zip Code 03444-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement direct mail and telemarketing 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) ▼
		DIRECT MAIL AND TELEMARKETING

B.	Full Name (Last, First, Middle Initial) Sprint - Embarq	Transaction ID: 81014.E4346 Date of Disbursement 09 / 09 / 2008
	Mailing Address P.O. Box 740602	Amount of Each Disbursement this Period 81.94
	City Cincinnati State OH Zip Code 45274-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone 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) ▼
		TELEPHONE

C.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 81015.E4430 Date of Disbursement 09 / 09 / 2008
	Mailing Address 7 Park Center	Amount of Each Disbursement this Period 987.00
	City Pittsburgh State PA Zip Code 15220-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advance Macks JVF- Air travel 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) ▼
		[MEMO ITEM] MEMO: ADVANCE MACKS JVF-AIR TRAVEL

SUBTOTAL of Disbursements This Page (optional)	9232.40
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 73 / 74

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A. Full Name (Last, First, Middle Initial) USPS Mailing Address 1050 Connecticut Ave, NW City Washington State DC Zip Code 20036- Purpose of Disbursement PO Box payment 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: 80714.E4217 Date of Disbursement 08 / 07 / 2008
	Amount of Each Disbursement this Period 66.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 PO BOX PAYMENT
B. Full Name (Last, First, Middle Initial) USPS Mailing Address 1050 Connecticut Ave, NW City Washington State DC Zip Code 20036- Purpose of Disbursement postage 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: 80814.E4335 Date of Disbursement 08 / 07 / 2008
	Amount of Each Disbursement this Period 210.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 POSTAGE

SUBTOTAL of Disbursements This Page (optional) ►

276.00

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

41447.19

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

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

FOR LINE NUMBER:
(check only one)

PAGE 74 / 74

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

A.	Full Name (Last, First, Middle Initial) Mack-Feeney Victory Fund	Transaction ID: 81015.E4427 Date of Disbursement 09 / 03 / 2008
	Mailing Address PO Box 65067	Amount of Each Disbursement this Period 15000.00
	City Washington State DC Zip Code 20035-5067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Trans to Mack-Feeney JVF Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Mack-Feeney Victory Fund	Transaction ID: 81015.E4428 Date of Disbursement 08 / 18 / 2008
	Mailing Address PO Box 65067	Amount of Each Disbursement this Period 100.00
	City Washington State DC Zip Code 20035-5067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Trans to Mack-Feeney JVF Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15100.00
TOTAL This Period (last page this line number only)	15100.00