

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00005561  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 23 2010 through 12 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Alma Gonzalez

Signature of Treasurer Electronically Filed by Alma Gonzalez Date 05 19 2011

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		726822.32
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	755331.18									
(c) Total Receipts (from Line 19) .....	156904.64	6772857.41								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	912235.82	7499679.73								
7. Total Disbursements (from Line 31) .....	385549.24	6957993.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	526686.58	541686.58								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	18541.50									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	6939.00	1274371.05
(ii) Unitemized .....	474.28	62140.87
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	7413.28	1549243.93
(b) Political Party Committees .....	0.00	711185.88
(c) Other Political Committees (such as PACs) .....	0.00	175590.65
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	7413.28	2436020.46
12. Transfers From Affiliated/Other Party Committees .....	139028.75	2951477.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	10252.65	125064.17
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	165.40	1055.48
17. Other Federal Receipts (Dividends, Interest, etc.) .....	44.56	961.12
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	903279.18
(b) Levin Funds (from Schedule H5) .....	0.00	355000.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	1258279.18
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	156904.64	6772857.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	156904.64	5514578.23

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	37436.07	286443.37
(ii) Non-Federal Share.....	141070.08	1171163.63
(b) Other Federal Operating Expenditures.....	177236.58	3637630.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	355742.73	5095237.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	355000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	100275.63
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	15350.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	15350.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	86011.30
(ii) "Levin" Share .....	0.00	323566.30
(b) Federal Election Activity Paid Entirely With Federal Funds .....	29806.51	982552.09
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	29806.51	1392129.69
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	385549.24	6957993.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	244479.16	5463263.22

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	7413.28	2436020.46
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	15350.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7413.28	2420670.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	214672.65	3924074.20
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	10252.65	125064.17
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	204420.00	3799010.03

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 234  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1706.12

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2010

**Transaction ID:** C6095835

Amount of Each Receipt this Period  
345.00

**B.**

Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1706.12

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2010

**Transaction ID:** C6095837

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1706.12

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2010

**Transaction ID:** C6095853

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **415.00**

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

A. Form/Schedule : **SA11AI**  
Transaction ID : **C6095835**

Credit of wire fees for November 2010

C. Form/Schedule : **SA11AI**  
Transaction ID : **C6095853**

Credit for wire fees paid in November

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 234
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Gwyndolen A. Clarke-Reed		Date of Receipt
	Mailing Address 150 NE 2nd Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 0 8 / 2 0 1 0
	City	State	Zip Code
	Deerfield Beach	FL	33441-3506
	FEC ID number of contributing federal political committee.		Transaction ID: C5662222
		Amount of Each Receipt this Period	<input type="text"/> 2160.00
Name of Employer Florida House Representatives		Occupation House Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2160.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Payroll Matters		Date of Receipt
	Mailing Address 2069 N Monroe St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Tallahassee	FL	32303-4727
	FEC ID number of contributing federal political committee.		Transaction ID: C6095508
		Amount of Each Receipt this Period	<input type="text"/> 135.00
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2002.63

<b>C.</b>	Full Name (Last, First, Middle Initial) Astra Remy-Calixte		Date of Receipt
	Mailing Address 269 NW 7th St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 9 / 2 0 1 0
	City	State	Zip Code
	Miami	FL	33136-3900
	FEC ID number of contributing federal political committee.		Transaction ID: C5653417
		Amount of Each Receipt this Period	<input type="text"/> 4000.00
Name of Employer Self Employed		Occupation Social Work	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 4000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 6295.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

B. Form/Schedule : **SA11AI**

Payroll 11.30 tax coming back.

Transaction ID : **C6095508**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 234  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)  
Marian Sanders

Mailing Address 3755 Dairy Rd

City	State	Zip Code
Titusville	FL	32796-4210

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

Name of Employer Self Employed	Occupation Real Estate
-----------------------------------	---------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
364.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	1	0

Transaction ID: C5657820

Amount of Each Receipt this Period  
364.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	364.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7074.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 234  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
JANET ALTMAN

Mailing Address 5935 SW 76th St

City State Zip Code  
South Miami FL 33143-5153

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

Name of Employer Occupation  
KOFFMAN, RUSMAN & COMPANY MARKETING DIRECTOR

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** C6474919

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Virginia T. Anthes

Mailing Address 570 Village Pl  
Apt 300

City State Zip Code  
Longwood FL 32779-6037

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

Name of Employer Occupation  
Not employed Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
95.00

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

**Transaction ID:** C6102621

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Dorothy Armstrong

Mailing Address 8470 SW 92nd Ln  
Unit C

City State Zip Code  
Ocala FL 34481-4566

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

Name of Employer Occupation  
Self Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
95.00

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

**Transaction ID:** C6102643

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Rosemary E. Armstrong  
Mailing Address 3415 W Mullen Ave  
City Tampa State FL Zip Code 33609-4631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00  
Date of Receipt 10 / 18 / 2010  
Transaction ID: C6102639  
Amount of Each Receipt this Period 475.00  
[MEMO ITEM]  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
John Arwood  
Mailing Address 11011 NW 15th St  
City Pembroke Pines State FL Zip Code 33026-2703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer University Of Miami Occupation Police Officer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 142.50  
Date of Receipt 11 / 02 / 2010  
Transaction ID: C6102646  
Amount of Each Receipt this Period 142.50  
[MEMO ITEM]  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
ASDC/Dollars For Democrats  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 35111.87  
Date of Receipt 12 / 07 / 2010  
Transaction ID: C5657830  
Amount of Each Receipt this Period 35000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 35000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 14 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Stuart Baker

Mailing Address 4188 Diplomacy Cir

City State Zip Code  
Tallahassee FL 32308-8719

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

Name of Employer Occupation  
Fsu Educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102629

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Edith Ballas

Mailing Address 204 Sea Oats Dr  
Apt F

City State Zip Code  
Juno Beach FL 33408-1447

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474920

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
Edith Ballas

Mailing Address 204 Sea Oats Dr  
Apt F

City State Zip Code  
Juno Beach FL 33408-1447

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

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

Transaction ID: C6474921

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 234  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Gary Barcus

Mailing Address 1689 SW 158th Ave

City State Zip Code  
Pembroke Pines FL 33027-2340

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

Name of Employer Occupation  
LAWYER Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
115.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474922

Amount of Each Receipt this Period  
115.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
James Bartholomew

Mailing Address 1311 Crown Isle Cir

City State Zip Code  
Apopka FL 32712-2932

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
190.00

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

Transaction ID: C6102615

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Stephen Bathiste

Mailing Address 3321 NW 196th Ln

City State Zip Code  
Miami Gardens FL 33056-2337

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
190.00

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

Transaction ID: C6102634

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
ALIX BAXTER  
Mailing Address 2201 NW 25th St  
City Gainesville State FL Zip Code 32605-3855  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Md  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.00  
Date of Receipt 10 / 18 / 2010  
Transaction ID: C6102616  
Amount of Each Receipt this Period 209.00  
[MEMO ITEM]  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Jean Bell  
Mailing Address 14 Balfour Rd W  
City Palm Beach Gardens State FL Zip Code 33418-7024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation Information Requested  
Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00  
Date of Receipt 10 / 05 / 2010  
Transaction ID: C6474923  
Amount of Each Receipt this Period 200.00  
[MEMO ITEM]  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
MARIA BERLANGA  
Mailing Address 2101 SW 59TH AVE  
City MIAMI State FL Zip Code 33155  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BILLING COMPLIANCE Occupation Information Requested  
Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 35.00  
Date of Receipt 10 / 25 / 2010  
Transaction ID: C6474924  
Amount of Each Receipt this Period 35.00  
[MEMO ITEM]  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 17 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Patricia N. Berman

Mailing Address 21174 Hamlin Dr

City State Zip Code  
Boca Raton FL 33433-7433

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	1	0

**Transaction ID:** C6474925

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Janet Blanks

Mailing Address 3377 NW 24th Way

City State Zip Code  
Boca Raton FL 33431-5421

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

Name of Employer Florida Atlantic University Occupation professor

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

**Transaction ID:** C6474926

Amount of Each Receipt this Period  
150.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
GEORGE BRENNER

Mailing Address 27 WARWICK DR

City State Zip Code  
SHALIMAR FL 32579

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

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

**Transaction ID:** C6474927

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 234  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
JOHN BUCKLEY

Mailing Address 3638 SW 57TH AVE

City State Zip Code  
MIAMI FL 33155

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474928

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Dagmar Carballo

Mailing Address 2220 Nantucket Dr

City State Zip Code  
Sun City Center FL 33573-7152

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 142.50

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102630

Amount of Each Receipt this Period  
142.50

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
HELEN CAYLOR

Mailing Address 5530 37TH ST E

City State Zip Code  
BRADENTON FL 34203

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474929

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Etzer Chicoye

Mailing Address 1259 SW 172nd Ter

City State Zip Code  
Pembroke Pines FL 33029-4821

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 237.50

Date of Receipt

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

Transaction ID: C6102652

Amount of Each Receipt this Period

118.75

**[MEMO ITEM]**  
\* Victory Fund

B.

Full Name (Last, First, Middle Initial)

Vonceil Coggin

Mailing Address PO Box 432

City State Zip Code  
Chipley FL 32428-0432

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102608

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**  
\* Victory Fund

C.

Full Name (Last, First, Middle Initial)

Mildred B. Cook

Mailing Address 1040 NW 6th Ter

City State Zip Code  
Boca Raton FL 33486-3454

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

Name of Employer Occupation  
Coldwell Banker Real Estate Sales

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 95.00

Date of Receipt

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

Transaction ID: C6102637

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**  
\* Victory Fund

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

0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Virginia Culbert

Mailing Address 235 Chaucer Ln

City State Zip Code  
Winter Haven FL 33884-2339

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

Name of Employer Polk W Board Of Cou Occupation Program Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 199.50

Date of Receipt: 10 / 12 / 2010  
Transaction ID: C6102609  
Amount of Each Receipt this Period: 199.50

**[MEMO ITEM]**  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
John V. D'Albora, Jr.

Mailing Address 230 Forrest Ave

City State Zip Code  
Cocoa FL 32922-7700

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 05 / 2010  
Transaction ID: C6474930  
Amount of Each Receipt this Period: 500.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
JEFF DAVIS

Mailing Address 4738 NW 38TH ST

City State Zip Code  
GAINESVILLE FL 32605

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

Name of Employer PROFESSOR Occupation Information Requested

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt: 10 / 05 / 2010  
Transaction ID: C6474931  
Amount of Each Receipt this Period: 20.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)  
JEFF DAVIS

Mailing Address 4738 NW 38TH ST

City	State	Zip Code
GAINESVILLE	FL	32605

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

Name of Employer PROFESSOR	Occupation Information Requested
-------------------------------	-------------------------------------

Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00
---	-----------------------------------

Date of Receipt

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

Transaction ID: C6474932

Amount of Each Receipt this Period

20.00

[MEMO ITEM]

\* Dollars For Democrats

B.

Full Name (Last, First, Middle Initial)  
JEFF DAVIS

Mailing Address 4738 NW 38TH ST

City	State	Zip Code
GAINESVILLE	FL	32605

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

Name of Employer PROFESSOR	Occupation Information Requested
-------------------------------	-------------------------------------

Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00
---	-----------------------------------

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 7 / 2 0 1 0

Transaction ID: C6474933

Amount of Each Receipt this Period

20.00

[MEMO ITEM]

\* Dollars For Democrats

C.

Full Name (Last, First, Middle Initial)  
Martin Davis

Mailing Address 3628 Foxwood Blvd

City	State	Zip Code
Wesley Chapel	FL	33543-5159

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102623

Amount of Each Receipt this Period

95.00

[MEMO ITEM]

\* Victory Fund

SUBTOTAL of Receipts This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1072672.16

Date of Receipt 11 / 30 / 2010

**Transaction ID:** C6015919

Amount of Each Receipt this Period 73914.00

**B.** Full Name (Last, First, Middle Initial)  
ROBERT P DIFFENDERFER

Mailing Address 506 27TH ST

City WEST PALM BEACH State FL Zip Code 33407

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

Name of Employer LAWYER Occupation Information Requested

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2010

**Transaction ID:** C6474934

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
DNC Service Corp

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 27228.59

Date of Receipt 12 / 30 / 2010

**Transaction ID:** C6102636

Amount of Each Receipt this Period 27228.59

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 73914.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)  
DNC Services Corp

Mailing Address 430 S Capitol St SE

City	State	Zip Code
Washington	DC	20003-4024

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

Name of Employer Occupation

Receipt For:

Primary  General

Other (specify) ▼

Aggregate Year-to-Date ▼

9848.00

Date of Receipt

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

Transaction ID: C5852550

Amount of Each Receipt this Period

4924.00

B.

Full Name (Last, First, Middle Initial)  
Doug Downer

Mailing Address 600 Lake Orienta Dr

City	State	Zip Code
Altamonte Springs	FL	32701-6308

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

Name of Employer Occupation  
Fiserv Programmer

Receipt For:

Primary  General

Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID: C6102617

Amount of Each Receipt this Period

380.00

[MEMO ITEM]

\* Victory Fund

C.

Full Name (Last, First, Middle Initial)  
DSP Joint Victory Fund, Florida Account

Mailing Address 430 S Capitol St SE

City	State	Zip Code
Washington	DC	20003-4024

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

Name of Employer Occupation

Receipt For:

Primary  General

Other (specify) ▼

Aggregate Year-to-Date ▼

17790.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 1 0

Transaction ID: C5910681

Amount of Each Receipt this Period

190.75

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

5114.75

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Marjorie Eiseman

Mailing Address 1603 Bayhouse Point Dr  
Apt BA107

City State Zip Code  
Sarasota FL 34231-6769

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.50

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

Transaction ID: C6102647

Amount of Each Receipt this Period  
237.50

**[MEMO ITEM]**  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Zlena Eneterio

Mailing Address 271 NW 156th Ln

City State Zip Code  
Pembroke Pines FL 33028-1502

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

Name of Employer Occupation  
Dr Ronald Gellés Arnp

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6102631

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Gloria E. Fitzgerald

Mailing Address 5641 SW 3rd St

City State Zip Code  
Plantation FL 33317-3510

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

Name of Employer Occupation  
Not employed Retired Educator

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474935

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Cecil Flemming

Mailing Address 582 SW Fairway Ave

City State Zip Code  
Port St Lucie FL 34983-2906

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 475.00

Date of Receipt

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

Transaction ID: C6102653

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\* Victory Fund

B.

Full Name (Last, First, Middle Initial)

Raymond W Fones

Mailing Address 5271 Azalea Cir

City State Zip Code  
Ridge Manor FL 33523-8829

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

Name of Employer Occupation  
Pasco County School Board Teacher

Receipt For: 2012 Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 40.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: C6474936

Amount of Each Receipt this Period

40.00

[MEMO ITEM]

\* Dollars For Democrats

C.

Full Name (Last, First, Middle Initial)

Norma Hay

Mailing Address 401 N L St  
Apt 2

City State Zip Code  
Lake Worth FL 33460-3074

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

Name of Employer Occupation  
Florida Atlantic University Data Coordinator

Receipt For: 2012 Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 65.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: C6474937

Amount of Each Receipt this Period

65.00

[MEMO ITEM]

\* Dollars For Democrats

SUBTOTAL of Receipts This Page (optional) ▶

0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

Full Name (Last, First, Middle Initial)  
Rosemary Hays-Thomas

Mailing Address 7998 Lancelot Dr

City State Zip Code  
Pensacola FL 32514-6434

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

Name of Employer Occupation  
Wofwest FL Psychology Faculty

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102622

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**  
\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)  
Bobby Henderson

Mailing Address 1580 Megan Bay Cir

City State Zip Code  
Holly Hill FL 32117-2045

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

Name of Employer Occupation  
Bethune-Cookman College Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 95.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 2 / 2 0 1 0

Transaction ID: C6102635

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**  
\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)  
DEBORAH HEROLD

Mailing Address 27106 ROBERTSON RD

City State Zip Code  
YALAHA FL 34797

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

Name of Employer Occupation  
ATTORNEY Information Requested

Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

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

Transaction ID: C6474938

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

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

0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 234  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
Nancy McDermott Herstand

Mailing Address 199 Ocean Lane Dr  
Apt 1000

City State Zip Code  
Key Biscayne FL 33149-1422

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
130.00

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

Transaction ID: C6474939

Amount of Each Receipt this Period  
130.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Susan Hoffman

Mailing Address 13603 Cozy Pl

City State Zip Code  
Tampa FL 33625-6461

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
47.50

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

Transaction ID: C6102648

Amount of Each Receipt this Period  
47.50

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Suzanne Costantino Jarvis

Mailing Address 6 Mendota Ln

City State Zip Code  
Sea Ranch Lakes FL 33308-2317

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

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

Transaction ID: C6474940

Amount of Each Receipt this Period  
125.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
Bradford Johnson

Mailing Address 808 Magnolia Shores Dr

City State Zip Code  
Niceville FL 32578-3412

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

Name of Employer Occupation  
Us Air Force Electronics Engineer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 190.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: C6102610

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**  
\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)  
Robert J. Keeler

Mailing Address 1463 Seafarer Dr

City State Zip Code  
Osprey FL 34229-9111

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

Name of Employer Occupation  
Retired Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1439.25

Date of Receipt

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

Transaction ID: C6102642

Amount of Each Receipt this Period

1439.25

**[MEMO ITEM]**  
\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)  
F King

Mailing Address 6514 Aqueduct Ct

City State Zip Code  
Tallahassee FL 32309-2002

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

Name of Employer Occupation  
Information Requested Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 190.00

Date of Receipt

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

Transaction ID: C6102607

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**  
\* Victory Fund

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

0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)  
F King

Mailing Address 6514 Aqueduct Ct

City State Zip Code  
Tallahassee FL 32309-2002

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

Name of Employer Information Requested Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 190.00

Date of Receipt

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

Transaction ID: C6102618

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**  
\* Victory Fund

B.

Full Name (Last, First, Middle Initial)  
Klein for Congress Inc.

Mailing Address 21301 Powerline Rd  
Ste 204

City State Zip Code  
Boca Raton FL 33433-2390

FEC ID number of contributing federal political committee. **C** C00410522

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 48000.00

Date of Receipt

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

Transaction ID: C6095839

Amount of Each Receipt this Period

25000.00

C.

Full Name (Last, First, Middle Initial)  
MARY LANDSMAN

Mailing Address 2730 SW 14TH DR

City State Zip Code  
GAINESVILLE FL 32608

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

Name of Employer Occupation Information Requested  
RETIRED

Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

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

Transaction ID: C6474941

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

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

25000.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
MARY LANDSMAN  
Mailing Address 2730 SW 14TH DR  
City Gainesville State FL Zip Code 32608  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation Information Requested  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00  
Date of Receipt 10 / 29 / 2010  
Transaction ID: C6474942  
Amount of Each Receipt this Period 50.00  
[MEMO ITEM]  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
William Larson  
Mailing Address 9031 SW 49th St  
City Cooper City State FL Zip Code 33328-3506  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 190.00  
Date of Receipt 10 / 18 / 2010  
Transaction ID: C6102619  
Amount of Each Receipt this Period 190.00  
[MEMO ITEM]  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Marcy Lewis  
Mailing Address 11111 Biscayne Blvd PH 52  
City North Miami State FL Zip Code 33181-3404  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation HOMEMAKER  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼ 75.00  
Date of Receipt 10 / 07 / 2010  
Transaction ID: C6474943  
Amount of Each Receipt this Period 75.00  
[MEMO ITEM]  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 31 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Daniel M. Lyons

Mailing Address 13685 Rivoli Dr

City State Zip Code  
Palm Bch Gdns FL 33410-1239

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  

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

**Transaction ID:** C6474944

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
HANNAH MALKIN

Mailing Address 1514 HERON DR

City State Zip Code  
SUN CITY CENTER FL 33573

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt  

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

**Transaction ID:** C6474945

Amount of Each Receipt this Period  
125.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
Carroll McCall

Mailing Address 2677 Blue Cypress Lake Ct

City State Zip Code  
Cape Coral FL 33909-2912

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt  

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

**Transaction ID:** C6102620

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Marjorie McDonald  
Mailing Address 165 Abeto Ter  
City Sebastian State FL Zip Code 32958-6231  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 47.50  
Date of Receipt 10 / 18 / 2010  
Transaction ID: C6102624  
Amount of Each Receipt this Period 47.50  
[MEMO ITEM]  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Connie C McEvoy  
Mailing Address 5391 Rose Marie Ave N  
City Boynton Beach State FL Zip Code 33472-1007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 380.00  
Date of Receipt 10 / 25 / 2010  
Transaction ID: C6102644  
Amount of Each Receipt this Period 190.00  
[MEMO ITEM]  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Palmer McGee  
Mailing Address 16521 Cypress Villa Ln  
City Fort Myers State FL Zip Code 33908-7609  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 95.00  
Date of Receipt 10 / 25 / 2010  
Transaction ID: C6102632  
Amount of Each Receipt this Period 95.00  
[MEMO ITEM]  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 33 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Susan McMillan  
 Mailing Address 3105 Arrowsmith Rd  
 City State Zip Code  
 Wimauma FL 33598-7603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 THERAPIST Therapist  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 40.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 8 / 2 0 1 0  
**Transaction ID:** C6474946  
 Amount of Each Receipt this Period  
 15.00  
**[MEMO ITEM]**  
 \* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Susan McMillan  
 Mailing Address 3105 Arrowsmith Rd  
 City State Zip Code  
 Wimauma FL 33598-7603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 THERAPIST Therapist  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 40.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 8 / 2 0 1 0  
**Transaction ID:** C6474947  
 Amount of Each Receipt this Period  
 25.00  
**[MEMO ITEM]**  
 \* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
William McWhorter  
 Mailing Address 11114 NW 38th Ln  
 City State Zip Code  
 Gainesville FL 32606-4986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 95.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 1 2 / 2 0 1 0  
**Transaction ID:** C6102611  
 Amount of Each Receipt this Period  
 95.00  
**[MEMO ITEM]**  
 \* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
Carrie P. Meek

Mailing Address PO Box 470925

City State Zip Code  
Miami FL 33247-0925

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
50.00

Date of Receipt

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

Transaction ID: C6474957

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**

\* Dollars For Democrats

**B.**

Full Name (Last, First, Middle Initial)  
LOUIS MERVAR

Mailing Address 6065 Verde Trl S  
Apt G302

City State Zip Code  
Boca Raton FL 33433-4419

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
323.00

Date of Receipt

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

Transaction ID: C6102633

Amount of Each Receipt this Period

323.00

**[MEMO ITEM]**

\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)  
CHARLOTTE MOONEY

Mailing Address PO BOX 52

City State Zip Code  
NEW SMYRNA BEACH FL 32170

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

Name of Employer Occupation  
RETIRED Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
165.00

Date of Receipt

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

Transaction ID: C6474962

Amount of Each Receipt this Period

115.00

**[MEMO ITEM]**

\* Dollars For Democrats

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

0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 234  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
CHARLOTTE MOONEY

Mailing Address PO BOX 52

City State Zip Code  
NEW SMYRNA BEACH FL 32170

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

Name of Employer Occupation  
RETIRED Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
165.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 1 0

Transaction ID: C6474963

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Rebecca Moore

Mailing Address 2635 Highway 73

City State Zip Code  
Marianna FL 32448-5451

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

Name of Employer Occupation  
Husband Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474958

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
Lois Naylor

Mailing Address 160 56th Ave S

City State Zip Code  
Saint Petersburg FL 33705-5441

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
427.50

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

Transaction ID: C6102625

Amount of Each Receipt this Period  
427.50

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 234  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
CLYDE PENCE

Mailing Address 660 ADAMS DIVE

City State Zip Code  
CRESTVIEW FL 32536

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

Name of Employer DOCTOR Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** C6474964

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Ann Pierson

Mailing Address 1831 NW 10th Ave

City State Zip Code  
Gainesville FL 32605-5311

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** C6102641

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
JAMES RAINEY

Mailing Address 3300 NE 36th St  
Apt 1710

City State Zip Code  
Fort Lauderdale FL 33308-6748

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** C6474960

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Donna J. Rich

Mailing Address 6830 SW 48th Ter

City Miami State FL Zip Code 33155-5700

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

Name of Employer Rio Palenque Res Corp Occupation Microbiologist

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt: 10 / 05 / 2010  
**Transaction ID:** C6474948  
 Amount of Each Receipt this Period: 75.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
James Riordan

Mailing Address 7111 Wild Forest Ct Apt 101

City Naples State FL Zip Code 34109-7856

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 47.50

Date of Receipt: 10 / 22 / 2010  
**Transaction ID:** C6102649  
 Amount of Each Receipt this Period: 23.75

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
James Riordan

Mailing Address 7111 Wild Forest Ct Apt 101

City Naples State FL Zip Code 34109-7856

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 47.50

Date of Receipt: 11 / 10 / 2010  
**Transaction ID:** C6102650  
 Amount of Each Receipt this Period: 23.75

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Larry S. Roberts

Mailing Address 27700 SW 164th Ave

City State Zip Code  
Homestead FL 33031-2846

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

Name of Employer Self-Employed Occupation  
Self-Employed Biologist

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** C6474953

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Beverly Rolle

Mailing Address 4940 SW 158th Ave

City State Zip Code  
Miramar FL 33027-4969

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

Name of Employer Information Requested Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
142.50

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

**Transaction ID:** C6102626

Amount of Each Receipt this Period  
142.50

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Eva Rus-Biason

Mailing Address 2240 SW 23rd St

City State Zip Code  
Miami FL 33145-3517

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

Name of Employer Self Employed Occupation  
Self Employed Pharmacist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
427.50

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

**Transaction ID:** C6102612

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 234  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
Eva Rus-Biason

Mailing Address 2240 SW 23rd St

City Miami State FL Zip Code 33145-3517

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

Name of Employer Self Employed Occupation Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 427.50

Date of Receipt 10 / 12 / 2010

Transaction ID: C6102613

Amount of Each Receipt this Period 237.50

**[MEMO ITEM]**  
\* Victory Fund

**B.**

Full Name (Last, First, Middle Initial)  
Martin Sass

Mailing Address 704 Bridgewood Dr

City Boca Raton State FL Zip Code 33434-4106

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

Name of Employer Information Requested Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt 10 / 18 / 2010

Transaction ID: C6102645

Amount of Each Receipt this Period 190.00

**[MEMO ITEM]**  
\* Victory Fund

**C.**

Full Name (Last, First, Middle Initial)  
Bruce E. Savage

Mailing Address 2005 Chickwood Ct

City Tampa State FL Zip Code 33618-1501

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

Name of Employer na Occupation na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 71.25

Date of Receipt 10 / 25 / 2010

Transaction ID: C6102640

Amount of Each Receipt this Period 71.25

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 234  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
JOYCE SCHNEIDER

Mailing Address 3435 FOX RUN RD UNIT 360

City State Zip Code  
SARASOTA FL 34231

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 65.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: C6474965

Amount of Each Receipt this Period  
30.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
JOYCE SCHNEIDER

Mailing Address 3435 FOX RUN RD UNIT 360

City State Zip Code  
SARASOTA FL 34231

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 65.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474966

Amount of Each Receipt this Period  
35.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
ANTHONY SCIARRETTA

Mailing Address 7643 ESTRELLA CIR

City State Zip Code  
BOCA RATON FL 33433

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: C6474967

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Irwin Slater

Mailing Address 200 Lake Ave NE  
Apt 419

City Largo State FL Zip Code 33771-1655

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

Name of Employer I.H. Slater Trust UTD Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 12 / 2010

Transaction ID: C6102614

Amount of Each Receipt this Period 475.00

**[MEMO ITEM]**  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
CAROLYN SMITH

Mailing Address 1111 5th St W

City Palmetto State FL Zip Code 34221-4910

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

Name of Employer RETIRED Occupation Information Requested

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 53.00

Date of Receipt 12 / 27 / 2010

Transaction ID: C6474961

Amount of Each Receipt this Period 53.00

**[MEMO ITEM]**  
\* Dollars For Democrats

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

Mailing Address 1624 SW 28th Ave

City Ft Lauderdale State FL Zip Code 33312-3949

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt 10 / 18 / 2010

Transaction ID: C6102627

Amount of Each Receipt this Period 95.00

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
ROD STOCKER

Mailing Address 6035 Chandelle Cir

City State Zip Code  
Pensacola FL 32507-8105

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

Name of Employer Occupation  
DOD MED TECH

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 21.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	1	0

**Transaction ID:** C6474959

Amount of Each Receipt this Period  
21.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
PEGGY STRAHMAN

Mailing Address 1569 LEWIS LN

City State Zip Code  
NEW SMYRNA FL 32168

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

Name of Employer Occupation  
RETIRED Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  

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

**Transaction ID:** C6474968

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
Richard Swan

Mailing Address 700 Melrose Ave  
Apt M3

City State Zip Code  
Winter Park FL 32789-5610

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

Name of Employer Occupation  
Univ Of Chicago Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 142.50

Date of Receipt  

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

**Transaction ID:** C6102628

Amount of Each Receipt this Period  
142.50

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

Mailing Address 3401 Seaway Dr

City State Zip Code  
New Prt Rchy FL 34652-8000

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

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

Transaction ID: C6102651

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Judith Thomson

Mailing Address 5969 San Michelle Dr  
Same

City State Zip Code  
Sarasota FL 34243-2649

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

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

Transaction ID: C6102654

Amount of Each Receipt this Period  
285.00

**[MEMO ITEM]**  
\* Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Ralph V. Turner

Mailing Address 842 Santa Rosa Dr

City State Zip Code  
Tallahassee FL 32301-5641

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 1 0

Transaction ID: C6474952

Amount of Each Receipt this Period  
85.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 234

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.**

Full Name (Last, First, Middle Initial)  
UNITEMIZED CONTRIBUTIONS

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
24560.14

Date of Receipt

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

Transaction ID: C6474918

Amount of Each Receipt this Period

24560.14

**[MEMO ITEM]**

\* Dollars For Democrats

**B.**

Full Name (Last, First, Middle Initial)  
ROSALYNE WEINER

Mailing Address 3040 GRAND BAY BLVD UNIT 242

City State Zip Code  
LONGBOAT KEY FL 34228

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

Name of Employer Occupation  
RETIRED Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 1 0

Transaction ID: C6474969

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

\* Dollars For Democrats

**C.**

Full Name (Last, First, Middle Initial)  
Nancy Wideman

Mailing Address 1100 E Pearl St

City State Zip Code  
Monticello FL 32344-3011

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

Name of Employer Occupation  
Jefferson County Schools Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
120.00

Date of Receipt

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

Transaction ID: C6474954

Amount of Each Receipt this Period

40.00

**[MEMO ITEM]**

\* Dollars For Democrats

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Nancy Wideman  
Mailing Address 1100 E Pearl St  
City Monticello State FL Zip Code 32344-3011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Jefferson County Schools Occupation Teacher  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 120.00  
Date of Receipt 11 / 09 / 2010  
Transaction ID: C6474955  
Amount of Each Receipt this Period 40.00  
[MEMO ITEM]  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Nancy Wideman  
Mailing Address 1100 E Pearl St  
City Monticello State FL Zip Code 32344-3011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Jefferson County Schools Occupation Teacher  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 120.00  
Date of Receipt 12 / 06 / 2010  
Transaction ID: C6474956  
Amount of Each Receipt this Period 40.00  
[MEMO ITEM]  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
Roger M. Wise  
Mailing Address 5350 Lake Le Clare Rd  
City Lutz State FL Zip Code 33558-4834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation RETIRED CHEMIST  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 197.50  
Date of Receipt 10 / 25 / 2010  
Transaction ID: C6474949  
Amount of Each Receipt this Period 50.00  
[MEMO ITEM]  
\* Dollars For Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 234  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Roger M. Wise

Mailing Address 5350 Lake Le Clare Rd

City Lutz State FL Zip Code 33558-4834

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

Name of Employer Retired Occupation RETIRED CHEMIST

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 197.50

Date of Receipt 11 / 04 / 2010

Transaction ID: C6474950

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**B.** Full Name (Last, First, Middle Initial)  
Roger M. Wise

Mailing Address 5350 Lake Le Clare Rd

City Lutz State FL Zip Code 33558-4834

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

Name of Employer Retired Occupation RETIRED CHEMIST

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 197.50

Date of Receipt 11 / 15 / 2010

Transaction ID: C6474951

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.** Full Name (Last, First, Middle Initial)  
Roger M. Wise

Mailing Address 5350 Lake Le Clare Rd

City Lutz State FL Zip Code 33558-4834

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

Name of Employer Retired Occupation RETIRED CHEMIST

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 197.50

Date of Receipt 10 / 18 / 2010

Transaction ID: C6102638

Amount of Each Receipt this Period 47.50

**[MEMO ITEM]**  
\* Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 234  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL ZEORLIN

Mailing Address 137 HARRISON ST

City State Zip Code  
TITUSVILLE FL 32780

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

Name of Employer Occupation  
RETIRED Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 1 0

Transaction ID: C6474970

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars For Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	139028.75

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 234  
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)  
Switchboard Communications

Mailing Address 888 16th St NW  
Ste 333

City State Zip Code  
Washington DC 20006-4118

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10125.01

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 1 5 / 2 0 1 0

Transaction ID: C5662402

Amount of Each Receipt this Period  
10125.01

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10125.01
<b>TOTAL</b> This Period (last page this line number only) .....	▶	10125.01

A. Form/Schedule : **SA15**

Offset of disbursement made to Switchboard Communications on 10/28/2010

Transaction ID : **C5662402**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 234
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial) Intermedia.Net		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 1 0
Mailing Address 156 W 56th St Ste 1601		<b>Transaction ID:</b> C6095858
City New York	State NY	Zip Code 10019-3878
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 148.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 148.00	

**B.**

Full Name (Last, First, Middle Initial) United States Postal Service		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 1 0
Mailing Address 2825 Lone Oak Pkwy Accounting Service Center		<b>Transaction ID:</b> C6095877
City Eagan	State MN	Zip Code 55121-1551
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 17.40
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 17.40	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	165.40
<b>TOTAL</b> This Period (last page this line number only) .....	▶	165.40

A. Form/Schedule : **SA16**  
Transaction ID : **C6095858**

Refund of payment made on 12/2/10

B. Form/Schedule : **SA16**  
Transaction ID : **C6095877**

Refund of overpayment made December 2010.

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

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

FOR LINE NUMBER: PAGE 52 / 234

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1706.12

Date of Receipt

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

Transaction ID: C5655223

Amount of Each Receipt this Period

24.14

**B.**

Full Name (Last, First, Middle Initial)  
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code  
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1706.12

Date of Receipt

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

Transaction ID: C6095882

Amount of Each Receipt this Period

20.42

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

44.56

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

44.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Action Mail Services, Inc.</p> <p>Mailing Address 1904 Premier Row</p> <p>City Orlando State FL Zip Code 32809-6206</p> <p>Purpose of Disbursement Direct Mail</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><b>Transaction ID:</b> D346622</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5531.93"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Taylor Adam</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349870</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="312.50"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Adrabi</p> <p>Mailing Address 1050 Brickell Ave Apt 2204</p> <p>City Miami State FL Zip Code 33131-3909</p> <p>Purpose of Disbursement Consulting/Communications</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><b>Transaction ID:</b> D346656</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>

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

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: D364053
	Mailing Address PO Box 53852	Date of Disbursement 12 / 20 / 2010
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period 11.00
	Purpose of Disbursement Merchant Service Fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: D364057
	Mailing Address PO Box 53852	Date of Disbursement 12 / 27 / 2010
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Merchant Service Fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Eric Anderson	Transaction ID: D349825
	Mailing Address 311 N Federal Hwy	Date of Disbursement 11 / 30 / 2010
	City Lake Worth State FL Zip Code 33460-3452	Amount of Each Disbursement this Period 287.50
	Purpose of Disbursement Canvass Fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>348.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adrian Arnillas</p> <p>Mailing Address 9899 NW 33rd St</p> <p>City Coral Springs State FL Zip Code 33065-4015</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347665 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 537.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) LaShawna Arnold</p> <p>Mailing Address 5742 Fletcher St</p> <p>City Hollywood State FL Zip Code 33023-2326</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349807 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 206.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Thais Arsolino</p> <p>Mailing Address 2910 SW 22nd Cir Apt E1</p> <p>City Delray Beach State FL Zip Code 33445-7864</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347668 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 262.50</p>

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

1006.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Kelsa Auglin	Transaction ID: D349806 Date of Disbursement 11 / 30 / 2010
	Mailing Address 801 SW Avenue C Pl Apt 3	Amount of Each Disbursement this Period 162.50
	City Belle Glade State FL Zip Code 33430-3214	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Emanuela Auguste	Transaction ID: D349872 Date of Disbursement 11 / 30 / 2010
	Mailing Address 801 Arthur Godfrey Rd	Amount of Each Disbursement this Period 656.25
	City Miami Beach State FL Zip Code 33140-3323	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Avis Rent A Car - Corporate	Transaction ID: D364051 Date of Disbursement 12 / 02 / 2010
	Mailing Address 6 Sylvan Way	Amount of Each Disbursement this Period 1.30
	City Parsippany State NJ Zip Code 07054-3826	
	Purpose of Disbursement Auto Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

820.05

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Avis Rent A Car - Corporate Mailing Address 6 Sylvan Way City Parsippany State NJ Zip Code 07054-3826 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D364593 Date of Disbursement 11 / 23 / 2010	Amount of Each Disbursement this Period 75.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Avis Rent A Car - Corporate Mailing Address 6 Sylvan Way City Parsippany State NJ Zip Code 07054-3826 Purpose of Disbursement Auto travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D379586 Date of Disbursement 11 / 29 / 2010	Amount of Each Disbursement this Period 4.75
<b>C.</b>	Full Name (Last, First, Middle Initial) Chad Bacon Mailing Address 1710 NW 3rd Ave Apt 2 City Fort Lauderdale State FL Zip Code 33311-4800 Purpose of Disbursement Canvass 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) ▼	<b>Transaction ID:</b> D347669 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 537.50

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>617.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Arthur Bailey	Transaction ID: D347670 Date of Disbursement 11 / 30 / 2010
	Mailing Address 6470 NW 26th St	Amount of Each Disbursement this Period 440.63
	City Sunrise State FL Zip Code 33313-2125	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Henrick Bailey	Transaction ID: D347671 Date of Disbursement 11 / 30 / 2010
	Mailing Address 6470 NW 26th St	Amount of Each Disbursement this Period 225.00
	City Sunrise State FL Zip Code 33313-2125	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sadie-Ann Bailey	Transaction ID: D347672 Date of Disbursement 11 / 30 / 2010
	Mailing Address 6470 NW 26th St	Amount of Each Disbursement this Period 278.13
	City Sunrise State FL Zip Code 33313-2125	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	943.76
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rupert Barnett</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349871 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 162.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Boris Bastidas</p> <p>Mailing Address 1880 Florida Atlantic Blvd # 24N</p> <p>City Boca Raton State FL Zip Code 33431-6455</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347673 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alex Batista</p> <p>Mailing Address 10705 NW 64th Ct</p> <p>City Parkland State FL Zip Code 33076-3769</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347674 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p>

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

662.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Laura Batista</p> <p>Mailing Address 10705 NW 64th Ct</p> <p>City Parkland State FL Zip Code 33076-3769</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347675 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 637.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Clarence Bednar</p> <p>Mailing Address 5462 Mirror Lakes Blvd</p> <p>City Boynton Beach State FL Zip Code 33472-1222</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349805 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 175.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Joan Bednar</p> <p>Mailing Address 5462 Mirror Lakes Blvd</p> <p>City Boynton Beach State FL Zip Code 33472-1222</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349804 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 175.00</p>

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

987.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Travis Bejlovec</p> <p>Mailing Address 524 NE 6th St</p> <p>City Pompano Beach State FL Zip Code 33060-6226</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347729 <b>Date of Disbursement</b> 12 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 425.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Berkley Bell</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347523 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tim Benitez</p> <p>Mailing Address 6260 NW 76th Ct</p> <p>City Parkland State FL Zip Code 33067-2432</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349817 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 462.50</p>

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

1037.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert Benoit</p> <p>Mailing Address 15480 South Post Rd Apt 103</p> <p>City Fort Lauderdale State FL Zip Code 33331</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349815 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Connie Berry</p> <p>Mailing Address 511 SE 18th Avenue</p> <p>City Pompano State FL Zip Code 33060</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379620 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 87.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) David Berry</p> <p>Mailing Address 1273 SE 4th Ave</p> <p>City Deerfield Beach State FL Zip Code 33441-6913</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349813 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>575.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Theresa Bertram</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349869 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 437.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ginetta Bethol</p> <p>Mailing Address 106 10th Ave.</p> <p>City Delray Beach State FL Zip Code 33444</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349811 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Blair</p> <p>Mailing Address 511 SE 18th Ave</p> <p>City Pompano Beach State FL Zip Code 33060-7633</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349810 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 653.13</p>

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

1215.63

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Tiffany Blocker</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Salary</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><b>Transaction ID:</b> D382729</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="587.50"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida</p> <p>Mailing Address PO Box 2210</p> <p>City Jacksonville State FL Zip Code 32203-2210</p> <p>Purpose of Disbursement Benefits</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><b>Transaction ID:</b> D347586</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4256.65"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nicholas Bois</p> <p>Mailing Address 2010 S Conference Dr</p> <p>City Boca Raton State FL Zip Code 33486-3127</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349809</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="312.50"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5156.65"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aliya Bonar</p> <p>Mailing Address 702 Lake Shore Dr</p> <p>City Delray Beach State FL Zip Code 33444-2848</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347664 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Danielle Brantley</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347528 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Shamonica Brantley</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347534 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>

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

725.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Brighthouse Networks	Transaction ID: D346653 Date of Disbursement 11 / 30 / 2010
	Mailing Address PO Box 31337 10305 NW 41st St., Ste 201	Amount of Each Disbursement this Period 22.50
	City Tampa State FL Zip Code 33631-3337	
	Purpose of Disbursement Internet	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brighthouse Networks	Transaction ID: D346654 Date of Disbursement 11 / 30 / 2010
	Mailing Address PO Box 31337 10305 NW 41st St., Ste 201	Amount of Each Disbursement this Period 84.95
	City Tampa State FL Zip Code 33631-3337	
	Purpose of Disbursement Internet	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rachel Broderick	Transaction ID: D349820 Date of Disbursement 11 / 30 / 2010
	Mailing Address 528 N Palmway	Amount of Each Disbursement this Period 587.50
	City Lake Worth State FL Zip Code 33460-3125	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	694.95
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Russell Broderick</p> <p>Mailing Address 528 N Palmway</p> <p>City Lake Worth State FL Zip Code 33460-3125</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349819 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 387.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Shadae Bromfield</p> <p>Mailing Address 10941 Winding Creek Ln</p> <p>City Boca Raton State FL Zip Code 33428-5664</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349818 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) William Brookley</p> <p>Mailing Address 1768 16th Ave N</p> <p>City Lake Worth State FL Zip Code 33460-6422</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347663 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 900.00</p>

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

1537.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andrew L. Brown</p> <p>Mailing Address 13301 NW 18th Pl</p> <p>City Miami State FL Zip Code 33167-1528</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349868</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brittney Brown</p> <p>Mailing Address 709 SW 10th St</p> <p>City Delray Beach State FL Zip Code 33444-2219</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349822</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tammy Brown</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347539</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>

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

762.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Budwah</p> <p>Mailing Address 4155 NW 90th Ave Apt 106</p> <p>City Coral Springs State FL Zip Code 33065-1793</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347661 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Bungarz</p> <p>Mailing Address 520 West County Rd</p> <p>City Bunnell State FL Zip Code 32110</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347662 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 512.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matt Burger</p> <p>Mailing Address 221 SW 6th St</p> <p>City Boynton Beach State FL Zip Code 33426-4316</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349827 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>

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

750.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Solomon Burgess, Jr</p> <p>Mailing Address 2744 NW 3rd St</p> <p>City Pompano Beach State FL Zip Code 33069-2161</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347660 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 690.63</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ahmed Burton</p> <p>Mailing Address 133 NW 5th Ave Apt 8</p> <p>City Delray Beach State FL Zip Code 33444-2673</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349826 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bernard Bush</p> <p>Mailing Address 1311 Highwoods Pass</p> <p>City Grovetown State GA Zip Code 30813-3993</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349867 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p>

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

1165.63

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Eddie Caesar Mailing Address 1048 Sunset Ave City Delray Beach State FL Zip Code 33444-2234 Purpose of Disbursement Canvass 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: D349785 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 37.50
B.	Full Name (Last, First, Middle Initial) Amanda Camacho Mailing Address 8401 Lake Worth Rd City Lake Worth State FL Zip Code 33467-2427 Purpose of Disbursement Canvass 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: D349866 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 312.50
C.	Full Name (Last, First, Middle Initial) Samanthia Campbell Mailing Address 16480 S Post Rd City Weston State FL Zip Code 33331-3562 Purpose of Disbursement Canvass 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: D349823 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 325.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>675.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Giancarlo Candia  Mailing Address 7771 Blairwood Cir N  City Lake Worth State FL Zip Code 33467-1803  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D347650 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 362.50
B.	Full Name (Last, First, Middle Initial) Kendra Caneo  Mailing Address 815 Indian River St  City Boca Raton State FL Zip Code 33431-6459  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D347651 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 112.50
C.	Full Name (Last, First, Middle Initial) George Cannon  Mailing Address 2832 NE 35th St  City Fort Lauderdale State FL Zip Code 33306-2006  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D347656 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 312.50

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>787.50</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hamiton Cannon</p> <p>Mailing Address 2832 NE 35th St</p> <p>City Fort Lauderdale State FL Zip Code 33306-2006</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347657 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 312.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Capital City Bank</p> <p>Mailing Address PO Box 1630</p> <p>City Tallahassee State FL Zip Code 32302-1630</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D364637 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Capital City Bank</p> <p>Mailing Address PO Box 1630</p> <p>City Tallahassee State FL Zip Code 32302-1630</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D364061 <b>Date of Disbursement</b> 12 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>352.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D364062 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="12"/> <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="32.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D364063 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="12"/> <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Shari Ceasar	Transaction ID: D349786 Date of Disbursement
	Mailing Address 1048 Sunset Ave	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Delray Beach State FL Zip Code 33444-2234	Amount of Each Disbursement this Period
	Purpose of Disbursement Canvass Fee	<input type="text" value="75.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="137.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Catherine Chalker</p> <p>Mailing Address 1325 Haverhill Rd N</p> <p>City West Palm Beach State FL Zip Code 33417-5811</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347687 <b>Date of Disbursement</b> 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jasmine Chatfield</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349873 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 237.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Eimar Chavez</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349874 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p>

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

737.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jay Cherry</p> <p>Mailing Address 4155 NW 90th Ave</p> <p>City Coral Springs State FL Zip Code 33065</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379619 <b>Date of Disbursement:</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael Church</p> <p>Mailing Address 3271 NW 114th Ave</p> <p>City Pompano Beach State FL Zip Code 33065-3107</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347649 <b>Date of Disbursement:</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Christian Cintron</p> <p>Mailing Address 801 Arthur Godfrey Rd</p> <p>City Miami Beach State FL Zip Code 33140-3323</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349875 <b>Date of Disbursement:</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 387.50</p>

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

787.50

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 234

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

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

A.	Full Name (Last, First, Middle Initial) City of Oviedo	Transaction ID: D346681 Date of Disbursement 11 / 30 / 2010
	Mailing Address 400 Alexandria Blvd	
	City Oviedo State FL Zip Code 32765-5514	Amount of Each Disbursement this Period 211.42
	Purpose of Disbursement Utilities 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) Michael Clark	Transaction ID: D347515 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1739 Morgans Mill Cir	
	City Orlando State FL Zip Code 32825-8292	Amount of Each Disbursement this Period 450.00
	Purpose of Disbursement Canvass Fee 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) Horace Clarke	Transaction ID: D349829 Date of Disbursement 11 / 30 / 2010
	Mailing Address 532 SW 9th St	
	City Belle Glade State FL Zip Code 33430-3262	Amount of Each Disbursement this Period 162.50
	Purpose of Disbursement Canvass Fee 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) ..... ▶

**823.92**

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) James Clermont	Transaction ID: D347646 Date of Disbursement 11 / 30 / 2010
	Mailing Address 332 Balsam St	
	City State Zip Code Palm Beach Gardens FL 33410-4809	Amount of Each Disbursement this Period 162.50
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jeff Cohen	Transaction ID: D347647 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1015 Spanish River Rd	
	City State Zip Code Boca Raton FL 33432-7600	Amount of Each Disbursement this Period 475.00
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jackie Coleman	Transaction ID: D347648 Date of Disbursement 11 / 30 / 2010
	Mailing Address 82 Canterbury Drive	
	City State Zip Code West Palm Beach FL 33417	Amount of Each Disbursement this Period 293.75
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	931.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Coleman</p> <p>Mailing Address 2605 McIntosh Dr</p> <p>City Lakeland State FL Zip Code 33815-3690</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349877 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 87.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lorraine Cornille</p> <p>Mailing Address PO Box 660297</p> <p>City Orlando State FL Zip Code 32816-0001</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379543 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 360.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lorraine Cornillie</p> <p>Mailing Address PO Box 660297</p> <p>City Orlando State FL Zip Code 32816-0001</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347805 <b>Date of Disbursement</b> 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 360.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>807.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Harley Cornwell</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347517</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jhoel Correa</p> <p>Mailing Address 4109 Cedar Creek Rd</p> <p>City Boca Raton State FL Zip Code 33487-2256</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349784</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cameron Covington</p> <p>Mailing Address 2583 SW 157th Ave</p> <p>City Miramar State FL Zip Code 33027-4278</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347645</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Charles Crawford</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347526 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Justin Crayton</p> <p>Mailing Address 1750 Eagle Trace Blvd</p> <p>City Coral Springs State FL Zip Code 33071-7817</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349799 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ashley Cuestas</p> <p>Mailing Address 10123 Canoe Brook Cir</p> <p>City Boca Raton State FL Zip Code 33498-4652</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349800 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>

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

**537.50**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Teddy Daniels</p> <p>Mailing Address 2501 Venetian Ct</p> <p>City Boynton Beach State FL Zip Code 33426-7463</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349801 <b>Date of Disbursement:</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: center;">331.25</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	331.25
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
331.25																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Deiufort Datis</p> <p>Mailing Address 510 East Kalmia Drive, Apt 1</p> <p>City West Palm Beach State FL Zip Code 33403</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347642 <b>Date of Disbursement:</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: center;">325.00</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	325.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
325.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Marie Datis</p> <p>Mailing Address 530 W Kalmia Dr</p> <p>City West Palm Beach State FL Zip Code 33403-2261</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347643 <b>Date of Disbursement:</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: center;">225.00</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	225.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
225.00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td style="text-align: center;">881.25</td></tr></table>	881.25
881.25		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td style="text-align: center;"> </td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ashley Davies</p> <p>Mailing Address 552 NW 87th Ter</p> <p>City Coral Springs State FL Zip Code 33071-7181</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347644 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Adrian Davis</p> <p>Mailing Address 532 SW 9th St</p> <p>City Belle Glade State FL Zip Code 33430-3262</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D364064 <b>Date of Disbursement</b> 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 162.50</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Danielle Davis</p> <p>Mailing Address 2131 NW 152nd St</p> <p>City Opa Locka State FL Zip Code 33054-2804</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347640 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>Category/Type</p>

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

687.50

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

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Deon Davis</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349879</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 162.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Diane Delossantos</p> <p>Mailing Address 8916 NW 40th St</p> <p>City Coral Springs State FL Zip Code 33065-2962</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349797</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Larry Dennard</p> <p>Mailing Address 11478 Silk Carnation Way</p> <p>City Royal Palm Beach State FL Zip Code 33411-4201</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349882</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>

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

262.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Hans Deslume</p> <p>Mailing Address 619 Minnesota St</p> <p>City Lantana State FL Zip Code 33462-2701</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347612</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Stevenson Deslume</p> <p>Mailing Address 271 Miner Rd</p> <p>City Boynton Beach State FL Zip Code 33435-1833</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347849</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 312.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ernest DeZavala</p> <p>Mailing Address 740 Meridale Ave</p> <p>City Orlando State FL Zip Code 32803-4259</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347806</p> <p>Date of Disbursement 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 480.00</p>

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

830.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ernest DeZavala</p> <p>Mailing Address 740 Meridale Ave</p> <p>City Orlando State FL Zip Code 32803-4259</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379544</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 480.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ryan DiMaria</p> <p>Mailing Address 10824 Heather Ridge Cir Apt 306</p> <p>City Orlando State FL Zip Code 32817-3342</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379602</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 620.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ryan DiMaria</p> <p>Mailing Address 10824 Heather Ridge Cir Apt 306</p> <p>City Orlando State FL Zip Code 32817-3342</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347800</p> <p>Date of Disbursement 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 620.00</p>

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

1720.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ty Dockins</p> <p>Mailing Address 5241 Tulane Ave</p> <p>City Jacksonville State FL Zip Code 32207-7717</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D346590 <b>Date of Disbursement</b> 12 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 455.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lakesha Douglas</p> <p>Mailing Address 404 SW 2nd St Apt 45</p> <p>City Deerfield Beach State FL Zip Code 33441-3245</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347639 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 681.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Duva</p> <p>Mailing Address 801 Arthur Godfrey Rd</p> <p>City Miami Beach State FL Zip Code 33140-3323</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349880 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p>

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

1361.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Mike Eberhardt	Transaction ID: D349881 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1824 N University Dr	Amount of Each Disbursement this Period 87.50
	City Plantation State FL Zip Code 33322-4114	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Elavon Merchant Services	Transaction ID: D364059 Date of Disbursement 12 / 02 / 2010
	Mailing Address 1 Concourse Pkwy NE Ste 300	Amount of Each Disbursement this Period 526.90
	City Atlanta State GA Zip Code 30328-5346	
	Purpose of Disbursement Merchant Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Elavon Merchant Services	Transaction ID: D364049 Date of Disbursement 12 / 02 / 2010
	Mailing Address 1 Concourse Pkwy NE Ste 300	Amount of Each Disbursement this Period 30.00
	City Atlanta State GA Zip Code 30328-5346	
	Purpose of Disbursement Merchant Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>644.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Elavon Merchant Services</p> <p>Mailing Address 1 Concourse Pkwy NE Ste 300</p> <p>City Atlanta State GA Zip Code 30328-5346</p> <p>Purpose of Disbursement Merchant 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><b>Transaction ID:</b> D364050</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.15"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tamisha Everett</p> <p>Mailing Address 2541 NW 152nd Ter</p> <p>City Opa Locka State FL Zip Code 33054-2731</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347636</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="187.50"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jim Ewing</p> <p>Mailing Address 1824 North University Drive</p> <p>City Plantation State FL Zip Code 33321</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379621</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="314.65"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dominic Fabres</p> <p>Mailing Address 515 Santander Ave Apt 2</p> <p>City Coral Gables State FL Zip Code 33134-6520</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347637 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 478.13</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brad Fair</p> <p>Mailing Address 6895 Fountain Circle</p> <p>City Lake Worth State FL Zip Code 33407</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349798 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 287.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wood Fauge</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349878 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>

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

890.63

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Trevor Feagin	Transaction ID: D347635 Date of Disbursement 11 / 30 / 2010
	Mailing Address 9416 NW 54th St	Amount of Each Disbursement this Period 1500.00
	City Sunrise State FL Zip Code 33351-7799	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Gabby Felix	Transaction ID: D349792 Date of Disbursement 11 / 30 / 2010
	Mailing Address 6750 NW 21st St	Amount of Each Disbursement this Period 112.50
	City Margate State FL Zip Code 33063-2116	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Betschina Ferancois	Transaction ID: D347630 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1240 W 37th St	Amount of Each Disbursement this Period 225.00
	City West Palm Beach State FL Zip Code 33404-2017	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1837.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andrew Ferrin</p> <p>Mailing Address 17424 NW 10th St</p> <p>City State Zip Code Pembroke Pines FL 33029-3116</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347631 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 687.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Florida Power &amp; Light Company</p> <p>Mailing Address PO Box 25576</p> <p>City State Zip Code Miami FL 33102-5576</p> <p>Purpose of Disbursement Utilities</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><b>Transaction ID:</b> D346597 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 94.29</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Clayton Flotz</p> <p>Mailing Address 12265 NW 7th Dr</p> <p>City State Zip Code Coral Springs FL 33071-4068</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347632 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 268.75</p>

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

1050.54

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Frank Forque</p> <p>Mailing Address 123 N 24th Ave North unit</p> <p>City Hollywood State FL Zip Code 33020-6602</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349794 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Claudia Francis</p> <p>Mailing Address 823 Wilex Drive</p> <p>City West Palm Beach State FL Zip Code 33404</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347629 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 218.75</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jermaine Frazier</p> <p>Mailing Address 130 SW 11th Ave</p> <p>City Delray Beach State FL Zip Code 33444-1528</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349846 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>

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

381.25

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.

Full Name (Last, First, Middle Initial)  
Ryan Frazier

Transaction ID: D347725  
Date of Disbursement

Mailing Address 515 NE 25th Ave

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

City State Zip Code  
Boynton Beach FL 33435-2139

Amount of Each Disbursement this Period

737.50
--------

Purpose of Disbursement

Canvass Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Bernard Freedman

Transaction ID: D349830  
Date of Disbursement

Mailing Address 10584 Royal Caribbean Cir

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

City State Zip Code  
Boynton Beach FL 33437-4284

Amount of Each Disbursement this Period

75.00
-------

Purpose of Disbursement

Canvass Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Nelson Fridline

Transaction ID: D347728  
Date of Disbursement

Mailing Address 635 Australian Cir

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

City State Zip Code  
West Palm Beach FL 33403-2514

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement

Canvass Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1112.50
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Douglas Fuller	Transaction ID: D347713 Date of Disbursement 11 / 30 / 2010
	Mailing Address 735 NW 126th Ave	Amount of Each Disbursement this Period 450.00
	City Coral Springs State FL Zip Code 33071-4424	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Anthony Fullerton	Transaction ID: D347538 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1739 Morgans Mill Cir	Amount of Each Disbursement this Period 450.00
	City Orlando State FL Zip Code 32825-8292	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Velita Fullerton	Transaction ID: D347540 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1739 Morgans Mill Cir	Amount of Each Disbursement this Period 150.00
	City Orlando State FL Zip Code 32825-8292	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Maya Gabriel</p> <p>Mailing Address 12310 Royal Palm Blvd</p> <p>City Coral Springs State FL Zip Code 33065-3204</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347714 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 525.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Enrique Gago</p> <p>Mailing Address 4334 NW 9th Ave Apt 113</p> <p>City Pompano Beach State FL Zip Code 33064-1705</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347715 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Valerie Galeano</p> <p>Mailing Address 2538 NW 92nd Ave</p> <p>City Coral Springs State FL Zip Code 33065-5108</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349831 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p>

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

950.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 97 / 234

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

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

A.	Full Name (Last, First, Middle Initial) Lizza Galloway	Transaction ID: D347634 Date of Disbursement 11 / 30 / 2010
	Mailing Address 9106 SW 22nd St Apt A	Amount of Each Disbursement this Period 112.50
	City Boca Raton State FL Zip Code 33428-7615	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ryan George	Transaction ID: D379600 Date of Disbursement 11 / 30 / 2010
	Mailing Address 12884 Lower River Blvd	Amount of Each Disbursement this Period 500.00
	City Orlando State FL Zip Code 32828-9010	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ryan George	Transaction ID: D379601 Date of Disbursement 12 / 20 / 2010
	Mailing Address 12884 Lower River Blvd	Amount of Each Disbursement this Period 500.00
	City Orlando State FL Zip Code 32828-9010	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1112.50

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 234

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

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

A.	Full Name (Last, First, Middle Initial) Dana Georke	Transaction ID: D349890 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1824 N University Dr	Amount of Each Disbursement this Period 50.00
	City Plantation State FL Zip Code 33322-4114	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rose Giachette	Transaction ID: D382753 Date of Disbursement 11 / 30 / 2010
	Mailing Address 823 Willex Drive	Amount of Each Disbursement this Period 137.50
	City West Palm Beach State FL Zip Code 33403	
	Purpose of Disbursement Salary	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rose Giachette	Transaction ID: D347789 Date of Disbursement 12 / 14 / 2010
	Mailing Address 823 Willex Drive	Amount of Each Disbursement this Period 137.50
	City West Palm Beach State FL Zip Code 33403	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	325.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Willie Gilliard	Transaction ID: D347585 Date of Disbursement 12 / 14 / 2010
	Mailing Address 2711 NW 21st St	Amount of Each Disbursement this Period 1450.00
	City Fort Lauderdale State FL Zip Code 33311-3309	
	Purpose of Disbursement Salary 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) Chevin Gillon	Transaction ID: D347716 Date of Disbursement 11 / 30 / 2010
	Mailing Address 630 SW 14th St	Amount of Each Disbursement this Period 462.50
	City Deerfield Beach State FL Zip Code 33441-6420	
	Purpose of Disbursement Canvass Fee 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) Randi Glickman	Transaction ID: D349832 Date of Disbursement 11 / 30 / 2010
	Mailing Address 9986 Holly Hill Dr	Amount of Each Disbursement this Period 150.00
	City Boynton Beach State FL Zip Code 33437-3605	
	Purpose of Disbursement Canvass Fee 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	2062.50
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 234

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Donald Godfrey  Mailing Address 504 W Perry St  City Lantana State FL Zip Code 33462-4548  Purpose of Disbursement Canvass 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) ▼	<b>Transaction ID:</b> D347717 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 412.50  Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Spencer Goehrig  Mailing Address 1531 NW 109th Ter  City Coral Springs State FL Zip Code 33071-6431  Purpose of Disbursement Canvass 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) ▼	<b>Transaction ID:</b> D347718 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 512.50  Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Moses Gonzalez  Mailing Address 9197 Ramblewood Dr Apt 727  City Coral Springs State FL Zip Code 33071-7072  Purpose of Disbursement Canvass 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) ▼	<b>Transaction ID:</b> D349833 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 75.00  Category/ Type	

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

1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christopher Granger</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349891 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Latoya Graves</p> <p>Mailing Address 5885 NW 23rd St</p> <p>City Lauderhill State FL Zip Code 33313-3164</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349834 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 606.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) David Grider</p> <p>Mailing Address 23054 Post Gardens Way Apt 414</p> <p>City Boca Raton State FL Zip Code 33433-7115</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349835 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>681.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Scott Grumbman</p> <p>Mailing Address 7480 Silver Woods Ct</p> <p>City Boca Raton State FL Zip Code 33433-3316</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349836 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 425.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Allison Grump</p> <p>Mailing Address PO Box 166554</p> <p>City Orlando State FL Zip Code 32816-6554</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347548 <b>Date of Disbursement</b> 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 580.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Allison Grump</p> <p>Mailing Address PO Box 166554</p> <p>City Orlando State FL Zip Code 32816-6554</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379598 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 580.00</p>

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

1585.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gray Guerrier</p> <p>Mailing Address 8572 Breezy Hill Dr</p> <p>City Boynton Beach State FL Zip Code 33473-4898</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347611 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nerlande Guerrier</p> <p>Mailing Address 8572 Breezy Hill Dr</p> <p>City Boynton Beach State FL Zip Code 33473-4898</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347633 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Richardine Guerrier</p> <p>Mailing Address 8572 Breezy Hill Dr</p> <p>City Boynton Beach State FL Zip Code 33473-4898</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349837 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>

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

275.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Eveling Harrell</p> <p>Mailing Address 532 SW 9th St</p> <p>City Belle Glade State FL Zip Code 33430-3262</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349839 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 162.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sierra Hatcher</p> <p>Mailing Address 401 NW 184th Ter</p> <p>City Miami State FL Zip Code 33169-4417</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347658 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jody Hayland</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349892 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>

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

350.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ryan Hearn</p> <p>Mailing Address 10937 NW 14th St</p> <p>City Coral Springs State FL Zip Code 33071-8214</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347719 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 900.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Stephanie Herra</p> <p>Mailing Address 10133 NW 48th Dr</p> <p>City Coral Springs State FL Zip Code 33076-1707</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347702 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 675.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rodrigo Hidalgo</p> <p>Mailing Address 901 N Federal Hwy Apt 8</p> <p>City Lake Worth State FL Zip Code 33460-2695</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349840 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>

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

1625.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Denise Hyppolite</p> <p>Mailing Address 609 SW 79th Ave</p> <p>City North Lauderdale State FL Zip Code 33068-2210</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347722 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 431.25</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Intuit Software</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043-1126</p> <p>Purpose of Disbursement Admin Office Supplies</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><b>Transaction ID:</b> D347867 <b>Date of Disbursement</b> 12 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 185.95</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) William Isbel</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349889 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 87.50</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>704.70</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sidney Issac</p> <p>Mailing Address 6876 Sugarloaf Key St</p> <p>City Lake Worth State FL Zip Code 33467-7652</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347721 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 143.75</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kami Jackson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347532 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mary Jackson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347533 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	443.75
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Reggie Jackson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347535 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mitchell Jacobs</p> <p>Mailing Address 651 NE 5th St</p> <p>City Pompano Beach State FL Zip Code 33060-6328</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347703 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 306.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Emmanuella Jacques</p> <p>Mailing Address 22490 SW 66th Ave</p> <p>City Boca Raton State FL Zip Code 33428-5936</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347704 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p>

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

556.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Julian James</p> <p>Mailing Address 8360 NW 46th St</p> <p>City Fort Lauderdale State FL Zip Code 33351-5527</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347705 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 540.63</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David Jampel</p> <p>Mailing Address 528 N Palmway</p> <p>City Lake Worth State FL Zip Code 33460-3125</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347707 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 587.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Freya Jester</p> <p>Mailing Address 4272 NW 120th Ln</p> <p>City Sunrise State FL Zip Code 33323-2659</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379588 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 213.50</p>

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

1341.63

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christopher Jimenez</p> <p>Mailing Address 424 Forest Hill Blvd</p> <p>City West Palm Beach State FL Zip Code 33405-4616</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347709 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Maria Jimenez</p> <p>Mailing Address 9109 SW 21st St Apt B</p> <p>City Boca Raton State FL Zip Code 33428-7626</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347710 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 168.75</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alton Johnson</p> <p>Mailing Address 3360 NW 6th St</p> <p>City Fort Lauderdale State FL Zip Code 33311-7602</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349803 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 381.25</p>

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

675.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andre Johnson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347527 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Marvin Johnson</p> <p>Mailing Address 3121 SE 9th Terrace</p> <p>City Pompano Beach State FL Zip Code 33064</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347711 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 43.75</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sean Johnson</p> <p>Mailing Address 6528 NW 58th Drive</p> <p>City Pompano Beach State FL Zip Code 33067</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347712 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 40.63</p>

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

534.38

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Scott Johnston <hr/> Mailing Address 1824 N University Dr <hr/> City Plantation State FL Zip Code 33322-4114 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D349888 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 37.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ruben Joseph <hr/> Mailing Address 260 NW 60th Ave <hr/> City Margate State FL Zip Code 33063-5182 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D382760 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 112.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Jeanni Jules <hr/> Mailing Address 1987 Nassau Dr <hr/> City West Palm Beach State FL Zip Code 33404-6460 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347726 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 225.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

375.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Stacy Kaiser</p> <p>Mailing Address 3626 Whitehall Drive</p> <p>City West Palm Beach State FL Zip Code 33401</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379587 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 68.75</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Joshua Kallen</p> <p>Mailing Address 13601 Columbine Ave</p> <p>City Wellington State FL Zip Code 33414-8107</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349824 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Joseph Kenney</p> <p>Mailing Address 1 Royal Palm Way Unit 106</p> <p>City Boca Raton State FL Zip Code 33432-7844</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349841 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 112.50</p>

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

256.25

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jad Khazem</p> <p>Mailing Address 2695 NW 29th Dr</p> <p>City Boca Raton State FL Zip Code 33434-3676</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347613 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mikhail Kogan</p> <p>Mailing Address 1824 N University Dr</p> <p>City Plantation State FL Zip Code 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349861 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 87.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gilbert Kubayanda</p> <p>Mailing Address 4341 NW 19th St Apt 8</p> <p>City Lauderhill State FL Zip Code 33313-7406</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347727 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 609.38</p>

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

771.88

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Telly Law</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347525 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Imeles Leger</p> <p>Mailing Address 131 Rosewood Cir</p> <p>City Jupiter State FL Zip Code 33458-5540</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347667 <b>Date of Disbursement</b> 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Glen-Daros Lemard</p> <p>Mailing Address 8311 NW 59th Ct</p> <p>City Tamarac State FL Zip Code 33321-4241</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347778 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 375.00</p>

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

625.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Keith Lester</p> <p>Mailing Address 3626 Whitehall Dr Apt 302</p> <p>City West Palm Beach State FL Zip Code 33401-1064</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347777</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 281.25</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) James Lewis</p> <p>Mailing Address 1325 Haverhill Rd N</p> <p>City West Palm Beach State FL Zip Code 33417-5811</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347776</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 193.75</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Franklin Ligonde</p> <p>Mailing Address 812 Venetian Isles Dr</p> <p>City Lake Park State FL Zip Code 33403-1855</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347760</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 425.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Sai Lo	Transaction ID: D347759 Date of Disbursement 11 / 30 / 2010
	Mailing Address 22380 NW 39th Court	Amount of Each Disbursement this Period 200.00
	City Pompano Beach State FL Zip Code 33065	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Krista Loeper	Transaction ID: D349862 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1824 N University Dr	Amount of Each Disbursement this Period 325.00
	City Plantation State FL Zip Code 33322-4114	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Pam Loewenstein	Transaction ID: D347821 Date of Disbursement 12 / 21 / 2010
	Mailing Address 4 Anglican Ln	Amount of Each Disbursement this Period 200.00
	City Lincolnshire State IL Zip Code 60069-3316	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	725.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Pam Loewenstein</p> <p>Mailing Address 4 Anglican Ln</p> <p>City Lincolnshire State IL Zip Code 60069-3316</p> <p>Purpose of Disbursement Salary</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><b>Transaction ID:</b> D382751</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Skarlett Lopez</p> <p>Mailing Address 2509 23rd St NW</p> <p>City Boynton Beach State FL Zip Code 33436-2133</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347758</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="325.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) LSG Strategies</p> <p>Mailing Address 2120 L St NW Ste 305</p> <p>City Washington State DC Zip Code 20037-1563</p> <p>Purpose of Disbursement Consulting/Communications</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><b>Transaction ID:</b> D342924</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2639.43"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3164.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Scott Magill	Transaction ID: D382762 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1824 N University Dr	Amount of Each Disbursement this Period 37.50
	City Plantation State FL Zip Code 33322-4114	
	Purpose of Disbursement Salary 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) Kelsee Major	Transaction ID: D382730 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1580 Red Pine Trail	Amount of Each Disbursement this Period 556.25
	City Wellington State FL Zip Code 33414	
	Purpose of Disbursement Salary 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) Julissa Malki	Transaction ID: D349849 Date of Disbursement 11 / 30 / 2010
	Mailing Address 15395 Take Off Pl	Amount of Each Disbursement this Period 50.00
	City Wellington State FL Zip Code 33414-8306	
	Purpose of Disbursement Canvass Fee 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) ..... ▶

643.75

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Danyale Manuel</p> <p>Mailing Address 6531 NW 14th Ct</p> <p>City Miami State FL Zip Code 33147-7907</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347756 <b>Date of Disbursement:</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: center;">237.50</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	237.50
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
237.50																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) D'Mitry Marin</p> <p>Mailing Address 1308 Bayview Dr # 29</p> <p>City Fort Lauderdale State FL Zip Code 33304-1632</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347757 <b>Date of Disbursement:</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: center;">1081.25</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	1081.25
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
1081.25																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jose Marrero</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349893 <b>Date of Disbursement:</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td style="text-align: center;">162.50</td> </tr> </table> </p> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0	162.50
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0													
162.50																						

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

**1481.25**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Guilherme Massetti <hr/> Mailing Address 10253 Crosswind Rd <hr/> City Boca Raton State FL Zip Code 33498-4740 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D347755 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 287.50
<b>B.</b>	Full Name (Last, First, Middle Initial) Brandon McConico <hr/> Mailing Address 1739 Morgans Mill Cir <hr/> City Orlando State FL Zip Code 32825-8292 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D347512 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 450.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Patty McCorn <hr/> Mailing Address 1824 N University Dr <hr/> City Plantation State FL Zip Code 33322-4114 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D349894 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 225.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>962.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steven McElroy</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347505 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Desmond McGowan</p> <p>Mailing Address 230 NW 20th St</p> <p>City Pompano Beach State FL Zip Code 33060-5043</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347754 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 231.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michelle McGrath</p> <p>Mailing Address PO Box 8462</p> <p>City Delray Beach State FL Zip Code 33482-8462</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349850 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p>

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

656.25

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 234

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Brandon McNew <hr/> Mailing Address 612 Anderson Cir Apt 103 <hr/> City State Zip Code Deerfield Beach FL 33441-7743 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D349851 Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 600.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Tracy Mierkey <hr/> Mailing Address 2697 Floral Rd <hr/> City State Zip Code Lantana FL 33462-3879 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347753 Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) David Millan <hr/> Mailing Address 6850 NW 2nd Ave Apt 2 <hr/> City State Zip Code Boca Raton FL 33487-2331 <hr/> Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D349852 Date of Disbursement 11 / 30 / 2010
	Amount of Each Disbursement this Period 75.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	775.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 234

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

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

A.	Full Name (Last, First, Middle Initial) Trey Miller	Transaction ID: D347547 Date of Disbursement 12 / 20 / 2010
	Mailing Address 2869 Aein Rd	
	City Orlando State FL Zip Code 32817-2931	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Trey Miller	Transaction ID: D379597 Date of Disbursement 11 / 30 / 2010
	Mailing Address 2869 Aein Rd	
	City Orlando State FL Zip Code 32817-2931	Amount of Each Disbursement this Period 700.00
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nickoda Mills	Transaction ID: D346591 Date of Disbursement 12 / 07 / 2010
	Mailing Address 5101 SW 60th Street Rd Apt 1807	
	City Ocala State FL Zip Code 34474-4708	Amount of Each Disbursement this Period 520.00
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1920.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 234

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

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

A.	Full Name (Last, First, Middle Initial) AJ Misaki	Transaction ID: D349853 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1880 Fau Blvd # 553 City Boca Raton State FL Zip Code 33431-6455 Purpose of Disbursement Canvass 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) ▼	Amount of Each Disbursement this Period 412.50

B.	Full Name (Last, First, Middle Initial) Mission Control	Transaction ID: D346598 Date of Disbursement 12 / 03 / 2010
	Mailing Address 114 Mansfield Hollow Rd # A City Mansfield Center State CT Zip Code 06250-1316 Purpose of Disbursement Direct Mail 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) ▼	Amount of Each Disbursement this Period 2400.00

C.	Full Name (Last, First, Middle Initial) Christina Montalvo	Transaction ID: D349843 Date of Disbursement 11 / 30 / 2010
	Mailing Address 5650 Pacific Blvd Apt 1105 City Boca Raton State FL Zip Code 33433-6797 Purpose of Disbursement Canvass 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) ▼	Amount of Each Disbursement this Period 350.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3162.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 127 / 234

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Laquesta Moreland</p> <p>Mailing Address 414 SW 2nd St Apt 94</p> <p>City State Zip Code Deerfield Beach FL 33441-3203</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347792 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 421.88</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Isabella Morinelli</p> <p>Mailing Address 2675 NW 31st St</p> <p>City State Zip Code Boca Raton FL 33434-3629</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349854 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 312.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brett Mulhall</p> <p>Mailing Address 1824 N University Dr</p> <p>City State Zip Code Plantation FL 33322-4114</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349898 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 281.25</p>

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

1015.63

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Justin Murphy	Transaction ID: D349856 Date of Disbursement 11 / 30 / 2010
	Mailing Address 33 E Camino Real Apt 904	Amount of Each Disbursement this Period 325.00
	City Boca Raton State FL Zip Code 33432-6156	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amirah Mustapha	Transaction ID: D349857 Date of Disbursement 11 / 30 / 2010
	Mailing Address 9124 NW 50th Ct	Amount of Each Disbursement this Period 150.00
	City Coral Springs State FL Zip Code 33067-1921	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jesse Mustapha	Transaction ID: D349897 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1824 N University Dr	Amount of Each Disbursement this Period 262.50
	City Plantation State FL Zip Code 33322-4114	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>737.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Francois Nerline	Transaction ID: D379590 Date of Disbursement 11 / 30 / 2010
	Mailing Address 530 W Kalmia Dr Apt 4	Amount of Each Disbursement this Period 225.00
	City West Palm Beach State FL Zip Code 33403-2233	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Francois Nerline	Transaction ID: D347851 Date of Disbursement 12 / 21 / 2010
	Mailing Address 530 W Kalmia Dr Apt 4	Amount of Each Disbursement this Period 225.00
	City West Palm Beach State FL Zip Code 33403-2233	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nesbitt Research	Transaction ID: D347819 Date of Disbursement 12 / 21 / 2010
	Mailing Address 2120 L St NW Ste 305	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20037-1563	
	Purpose of Disbursement Consulting/Research	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2950.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) James Noland  Mailing Address 14575 Bonaire Blvd Apt 405  City Delray Beach State FL Zip Code 33446-1723  Purpose of Disbursement Canvass 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: D347609 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 350.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Notley  Mailing Address 33 E Camino Real Apt 904  City Boca Raton State FL Zip Code 33432-6156  Purpose of Disbursement Canvass 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: D349858 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 225.00  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Phillip Odle  Mailing Address 230 NW 20th Street  City Pompano State FL Zip Code 33060  Purpose of Disbursement Canvass 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: D379592 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 125.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mary Anne Oldham</p> <p>Mailing Address 3009 1/2 W Barcelona St Apt 2</p> <p>City Tampa State FL Zip Code 33629-7252</p> <p>Purpose of Disbursement Admin Lease/Rent</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><b>Transaction ID:</b> D346657</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 221.63</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bruce Oliveira</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349896</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 387.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Hunter Ostrower</p> <p>Mailing Address 801 Arthur Godfrey Rd</p> <p>City Miami Beach State FL Zip Code 33140-3323</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349895</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 362.50</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>971.63</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

A. Form/Schedule : **SB21B**  
Transaction ID : **D346657**

Mary Anne Oldham is the vendor for this disbursement- this is not a reimbursement.

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Kimberly Ostrower	Transaction ID: D347791 Date of Disbursement 11 / 30 / 2010
	Mailing Address 3401 W Hillsboro Blvd	Amount of Each Disbursement this Period 487.50
	City Coconut Creek State FL Zip Code 33073-2096	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Robert Ostrower	Transaction ID: D347790 Date of Disbursement 11 / 30 / 2010
	Mailing Address 3401 W Hillsboro Blvd Apt M207	Amount of Each Disbursement this Period 325.00
	City Coconut Creek State FL Zip Code 33073-2084	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Munghai Parachankhet	Transaction ID: D349780 Date of Disbursement 11 / 30 / 2010
	Mailing Address 33 E Camino Real Apt 904	Amount of Each Disbursement this Period 462.50
	City Boca Raton State FL Zip Code 33432-6156	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1275.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Willie Partner</p> <p>Mailing Address 4421 SW 27th St</p> <p>City West Park State FL Zip Code 33023-4357</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D344401 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 520.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Melissa Perez</p> <p>Mailing Address 8010 Hampton Blvd Apt 310</p> <p>City North Lauderdale State FL Zip Code 33068-5608</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347779 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Salvador Perez</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349884 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 287.50</p>

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

932.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Sergio Perez Mailing Address 1580 Red Pine Trl City Wellington State FL Zip Code 33414-5820 Purpose of Disbursement Canvass 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: D347785 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 150.00
B.	Full Name (Last, First, Middle Initial) Matthew Pitt Mailing Address 3101 NW 47th Ter Apt 13 City Lauderdale Lakes State FL Zip Code 33319-6605 Purpose of Disbursement Canvass 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: D347786 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 81.25
C.	Full Name (Last, First, Middle Initial) Craig Plazure Mailing Address 3101 NW 47th Terrace City Lauderdale Lakes State FL Zip Code 33414 Purpose of Disbursement Canvass 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: D379591 Date of Disbursement 11 / 30 / 2010	Amount of Each Disbursement this Period 100.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	331.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ty Powell</p> <p>Mailing Address 2860 NW 115th Ter</p> <p>City Coral Springs State FL Zip Code 33065-3438</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349787 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Printmeisters, Inc.</p> <p>Mailing Address 10732 William Tell Dr</p> <p>City Orlando State FL Zip Code 32821-8764</p> <p>Purpose of Disbursement Direct Mail</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><b>Transaction ID:</b> D347836 <b>Date of Disbursement</b> 12 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 11874.75</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Printmeisters, Inc.</p> <p>Mailing Address 10732 William Tell Dr</p> <p>City Orlando State FL Zip Code 32821-8764</p> <p>Purpose of Disbursement Direct Mail</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><b>Transaction ID:</b> D346599 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 31311.00</p>

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

43410.75

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Progress Energy Florida	Transaction ID: D346655 Date of Disbursement 11 / 30 / 2010
	Mailing Address PO Box 33199	
	City Saint Petersburg State FL Zip Code 33733-8199	Amount of Each Disbursement this Period 214.28
	Purpose of Disbursement Utilities 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) Douglas R. Pugh	Transaction ID: D347787 Date of Disbursement 11 / 30 / 2010
	Mailing Address PO Box 272813	
	City Boca Raton State FL Zip Code 33427-2813	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Canvass Fee 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) Michael Pugh	Transaction ID: D347788 Date of Disbursement 11 / 30 / 2010
	Mailing Address 611 SE 10th St	
	City Pompano Beach State FL Zip Code 33060-9405	Amount of Each Disbursement this Period 468.75
	Purpose of Disbursement Canvass Fee 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1283.03
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Sarah Ramnanan	Transaction ID: D349791 Date of Disbursement 11 / 30 / 2010
	Mailing Address 5928 NW 77th Ter	Amount of Each Disbursement this Period 425.00
	City Parkland State FL Zip Code 33067-1104	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Richard Ramsay	Transaction ID: D347610 Date of Disbursement 11 / 30 / 2010
	Mailing Address 2880 Tennis Club Dr Apt 500	Amount of Each Disbursement this Period 650.00
	City West Palm Beach State FL Zip Code 33417-2876	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Richard Ramsey	Transaction ID: D347700 Date of Disbursement 12 / 20 / 2010
	Mailing Address 2880 Tennis Club Dr Apt 500	Amount of Each Disbursement this Period 650.00
	City West Palm Beach State FL Zip Code 33417-2876	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1725.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mike Ray</p> <p>Mailing Address 7806 Woodsmuir Dr</p> <p>City West Palm Beach State FL Zip Code 33412-1640</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347752 <b>Date of Disbursement:</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 175.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lisa Rich</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347521 <b>Date of Disbursement:</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lucy Rich</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347519 <b>Date of Disbursement:</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>

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

1075.00

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

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

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

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(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Charity Richardson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347522 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Amaneda Rivero</p> <p>Mailing Address 1502 SE 2nd Pl</p> <p>City Cape Coral State FL Zip Code 33990-2009</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349793 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 212.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brandon Rizzo</p> <p>Mailing Address 8100 NW 38th St</p> <p>City Coral Springs State FL Zip Code 33065-2920</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347730 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 412.50</p>

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

1075.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cedarius Robertson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347524 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Marcus Robinson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347520 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Maria A. Rodriguez</p> <p>Mailing Address 879 NW 45th St</p> <p>City Pompano Beach State FL Zip Code 33064-1610</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347732 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>

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

650.00

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

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

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

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(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Vincent Rollo</p> <p>Mailing Address 10223 Allamanda Blvd</p> <p>City State Zip Code Palm Beach Gardens FL 33410-5206</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349795 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Vinncent Rollo</p> <p>Mailing Address 10223 Allamanda Blvd</p> <p>City State Zip Code Palm Beach Gardens FL 33410-5206</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347514 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Taylor Rompell</p> <p>Mailing Address 5318 SW 26th Ave</p> <p>City State Zip Code Cape Coral FL 33914-6626</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349796 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 112.50</p>

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

**312.50**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jonathan Rosen</p> <p>Mailing Address 9035 NW 51st Pl</p> <p>City Coral Springs State FL Zip Code 33067-1929</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347733 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 412.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Rahmeir Ross</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349876 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 56.25</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Ruiz</p> <p>Mailing Address 830 SW 80th Ave</p> <p>City North Lauderdale State FL Zip Code 33068-2131</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347734 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 56.25</p>

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

525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Vanessa Salinas</p> <p>Mailing Address 1350 NE 50th Ct Apt 408</p> <p>City Fort Lauderdale State FL Zip Code 33334-4949</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347735 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 412.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jonathan Schaefer</p> <p>Mailing Address 8 SE 19th Ave Apt 1</p> <p>City Pompano Beach State FL Zip Code 33060-7550</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349808 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 212.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew Schwartz</p> <p>Mailing Address 13030 SW 104th Ave</p> <p>City Miami State FL Zip Code 33176-5502</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349860 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 337.50</p>

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

962.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jason Scott</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347518 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Caroline Sederbaum</p> <p>Mailing Address 6901 Okeechobee Blvd</p> <p>City West Palm Beach State FL Zip Code 33411-2511</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349828 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 87.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mallory Senat</p> <p>Mailing Address 208 Clematis St Ste 507</p> <p>City West Palm Beach State FL Zip Code 33401-5547</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349821 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 543.75</p>

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

1081.25

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Xavior Serrano</p> <p>Mailing Address 1319 W Jennings St</p> <p>City Lantana State FL Zip Code 33462-4153</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347736 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 325.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David Sharvit</p> <p>Mailing Address 960 Coral Ridge Dr Apt 102</p> <p>City Coral Springs State FL Zip Code 33071-4166</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347737 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Corey A Shearer</p> <p>Mailing Address 2455 N Nob Hill Rd Apt 201</p> <p>City Sunrise State FL Zip Code 33322-5309</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347738 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 496.88</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1421.88
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dorchas Shorter  Mailing Address 1739 Morgans Mill Cir  City Orlando State FL Zip Code 32825-8292  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347531 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Marc Simms  Mailing Address 9174 Silver Glen Way  City Lake Worth State FL Zip Code 33467-4795  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347739 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 37.50
<b>C.</b>	Full Name (Last, First, Middle Initial) SKD Knickerbocker  Mailing Address 1818 N St NW Ste 450  City Washington State DC Zip Code 20036-2473  Purpose of Disbursement Direct Mail Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D346680 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 7975.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8162.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Donald Lee Smith, III	Transaction ID: D347516 Date of Disbursement 11 / 30 / 2010
	Mailing Address 2622 NE 4th Ct	
	City Boynton Beach State FL Zip Code 33435-2129	Amount of Each Disbursement this Period 412.50
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Henry Smith	Transaction ID: D347681 Date of Disbursement 12 / 20 / 2010
	Mailing Address 847 Laurel Dr	
	City West Palm Beach State FL Zip Code 33403-2122	Amount of Each Disbursement this Period 225.00
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jeremy Smith	Transaction ID: D347740 Date of Disbursement 11 / 30 / 2010
	Mailing Address 220 NW 20th St	
	City Pompano Beach State FL Zip Code 33060-5043	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	937.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Keona Smith</p> <p>Mailing Address 840 NW 12th Ave Apt 1</p> <p>City Fort Lauderdale State FL Zip Code 33311-7193</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349859 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 212.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lee Smith</p> <p>Mailing Address 2622 NE 4th Ct</p> <p>City Boynton Beach State FL Zip Code 33435-2129</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349855 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 412.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lois Smith</p> <p>Mailing Address 122 NW 8th Ave</p> <p>City Boynton Beach State FL Zip Code 33435-3024</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349812 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p>

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

700.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mysti Smith</p> <p>Mailing Address 1325 Haverhill Rd N</p> <p>City West Palm Beach State FL Zip Code 33417-5811</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349816 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 525.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matt Snipe</p> <p>Mailing Address 532 SW 9th St</p> <p>City Belle Glade State FL Zip Code 33430-3262</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349845 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Joshua Solomon</p> <p>Mailing Address 5575 NW 119th Drive</p> <p>City Pompano Beach State FL Zip Code 33076</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347741 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p>

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

975.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) George Sortino</p> <p>Mailing Address 211 NE 15th Ave</p> <p>City Pompano Beach State FL Zip Code 33060-6725</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347742 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 515.63</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jean St. Fortist</p> <p>Mailing Address 530 W Kalmia Dr</p> <p>City West Palm Beach State FL Zip Code 33403-2261</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347751 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 337.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nick Stallworth</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347541 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>

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

1303.13

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Nicole Stallworth</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347530 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Noya Stanley</p> <p>Mailing Address 1151 Lake Terry Dr Apt P</p> <p>City West Palm Beach State FL Zip Code 33411-9288</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349844 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Clint Starling</p> <p>Mailing Address 3801 Summer Wind Dr</p> <p>City Winter Park State FL Zip Code 32792-5210</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347543 <b>Date of Disbursement</b> 12 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 560.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	760.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Clint Starling</p> <p>Mailing Address 3801 Summer Wind Dr</p> <p>City Winter Park State FL Zip Code 32792-5210</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379596</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 560.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Christopher Stickney</p> <p>Mailing Address 706 13th Ave N</p> <p>City Lake Worth State FL Zip Code 33460-1801</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347626</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 593.75</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Janet Stinger</p> <p>Mailing Address 1433 SE 5th Ct</p> <p>City Deerfield Beach State FL Zip Code 33441-4935</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347627</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 600.00</p>

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

1753.75

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Rafael Suarez	Transaction ID: D347628 Date of Disbursement 11 / 30 / 2010
	Mailing Address 100 Golden Isles Dr Apt 1003	Amount of Each Disbursement this Period 750.00
	City Hallandale Beach State FL Zip Code 33009-8811	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Natasha Sully	Transaction ID: D349788 Date of Disbursement 11 / 30 / 2010
	Mailing Address 723 Avenue Chaumont	Amount of Each Disbursement this Period 162.50
	City Delray Beach State FL Zip Code 33445-2201	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rachel Sultman	Transaction ID: D347546 Date of Disbursement 12 / 20 / 2010
	Mailing Address 3737 Shawn Cir	Amount of Each Disbursement this Period 860.00
	City Orlando State FL Zip Code 32826-5308	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1772.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rachel Sultman</p> <p>Mailing Address 3737 Shawn Cir</p> <p>City Orlando State FL Zip Code 32826-5308</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D379595 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 860.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Charles Suselune</p> <p>Mailing Address 5181 Cedar Lake Rd Apt 1319</p> <p>City Boynton Beach State FL Zip Code 33437-6216</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349802 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 112.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Richard Tandy</p> <p>Mailing Address 8401 Lake Worth Rd</p> <p>City Lake Worth State FL Zip Code 33467-2427</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349883 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 325.00</p>

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

1297.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Eric Tegethoff	Transaction ID: D379593 Date of Disbursement 11 / 30 / 2010
	Mailing Address 3609 Dubsdread Cir	Amount of Each Disbursement this Period 480.00
	City Orlando State FL Zip Code 32804-3079	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eric Tegethoff	Transaction ID: D347544 Date of Disbursement 12 / 20 / 2010
	Mailing Address 3609 Dubsdread Cir	Amount of Each Disbursement this Period 480.00
	City Orlando State FL Zip Code 32804-3079	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Laverene Telucian	Transaction ID: D349789 Date of Disbursement 11 / 30 / 2010
	Mailing Address 133 SW 16th Ave Apt. 10	Amount of Each Disbursement this Period 87.50
	City Delray Beach State FL Zip Code 33444	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1047.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Kristopher Thibault	Transaction ID: D347624 Date of Disbursement 11 / 30 / 2010
	Mailing Address 2632 NE 13th Ter	Amount of Each Disbursement this Period 462.50
	City Pompano Beach State FL Zip Code 33064-6922	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Robert Thomas	Transaction ID: D349790 Date of Disbursement 11 / 30 / 2010
	Mailing Address 3820 NW 6th St	Amount of Each Disbursement this Period 125.00
	City Fort Lauderdale State FL Zip Code 33311-6310	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brent Toomey	Transaction ID: D347625 Date of Disbursement 11 / 30 / 2010
	Mailing Address 422 S K St	Amount of Each Disbursement this Period 118.75
	City Lake Worth State FL Zip Code 33460-4510	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	706.25
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) David A. Torgerson</p> <p>Mailing Address 309 1/2 NE 1st St</p> <p>City Delray Beach State FL Zip Code 33483-4519</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349885 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 87.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Craig D. Tucker</p> <p>Mailing Address Gibbs Hall # 631</p> <p>City Tallahassee State FL Zip Code 32307-0001</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349886 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 37.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Guy Tucker</p> <p>Mailing Address 11655 NW 71st Pl</p> <p>City Parkland State FL Zip Code 33076-3349</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349838 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p>

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

350.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rene Vazquez</p> <p>Mailing Address 2889 NW 91st Ave</p> <p>City Coral Springs State FL Zip Code 33065-5071</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349783</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 112.50</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Yosselet Vilbert</p> <p>Mailing Address 801 Arthur Godfrey Rd</p> <p>City Miami Beach State FL Zip Code 33140-3323</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D349887</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Emmanuel Vilbrun</p> <p>Mailing Address 510 East Kalmia Drive</p> <p>City West Palm Beach State FL Zip Code 33403</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347621</p> <p>Date of Disbursement 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 337.50</p>

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Roselette Vilbrun <hr/> Mailing Address 530 W Kalmia Dr <hr/> City West Palm Beach State FL Zip Code 33403-2261 <hr/> Purpose of Disbursement Canvass Fee 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) ▼	<b>Transaction ID:</b> D347622 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 225.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Zachary Volkman <hr/> Mailing Address 4189 Coral Springs Dr <hr/> City Coral Springs State FL Zip Code 33065-6402 <hr/> Purpose of Disbursement Canvass Fee 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) ▼	<b>Transaction ID:</b> D347602 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 50.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Jarod Walters <hr/> Mailing Address 4600 SW 25th St <hr/> City West Park State FL Zip Code 33023-4306 <hr/> Purpose of Disbursement Canvass Fee 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) ▼	<b>Transaction ID:</b> D347601 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 206.25

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>481.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Alvin Warren	Transaction ID: D349779 Date of Disbursement 11 / 30 / 2010
	Mailing Address 632 SW Avenue C Pl Apt 3	Amount of Each Disbursement this Period 162.50
	City Belle Glade State FL Zip Code 33430-5874	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Destiny Watkins	Transaction ID: D349781 Date of Disbursement 11 / 30 / 2010
	Mailing Address 533 Wildwood Pkwy	Amount of Each Disbursement this Period 325.00
	City Cape Coral State FL Zip Code 33904-5248	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sarah Weingarten	Transaction ID: D347619 Date of Disbursement 11 / 30 / 2010
	Mailing Address 130 Meadowlands Dr	Amount of Each Disbursement this Period 43.75
	City West Palm Beach State FL Zip Code 33411-8274	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	531.25
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Weingarten Realty</p> <p>Mailing Address 2720 E Colonial Dr</p> <p>City Orlando State FL Zip Code 32803-5025</p> <p>Purpose of Disbursement Lease/Rent</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><b>Transaction ID:</b> D346972 <b>Date of Disbursement</b> 12 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 400.02</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mike Weinstein</p> <p>Mailing Address 10756 NW 21st St</p> <p>City Coral Springs State FL Zip Code 33071-4218</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347620 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Eric Weiss</p> <p>Mailing Address 311 N Federal Hwy Apt 9</p> <p>City Lake Worth State FL Zip Code 33460-3452</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347603 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 212.50</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>862.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Ann Whalin	Transaction ID: D347820 Date of Disbursement 12 / 21 / 2010
	Mailing Address 3626 Whitehall Dr Apt 302	Amount of Each Disbursement this Period 81.25
	City West Palm Beach State FL Zip Code 33401-1064	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ann Whalin	Transaction ID: D379622 Date of Disbursement 11 / 30 / 2010
	Mailing Address 3626 Whitehall Dr Apt 302	Amount of Each Disbursement this Period 81.25
	City West Palm Beach State FL Zip Code 33401-1064	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Shantavia Whimley	Transaction ID: D347615 Date of Disbursement 11 / 30 / 2010
	Mailing Address 18451 NE 37th Ave Apt 117	Amount of Each Disbursement this Period 250.00
	City Opa Locka State FL Zip Code 33056	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**412.50**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Cameron White  Mailing Address 5725 NW 101st Way  City State Zip Code Coral Springs FL 33076-2591  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347616 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period  487.50
<b>B.</b>	Full Name (Last, First, Middle Initial) James White  Mailing Address 1325 Haverhill Rd N  City State Zip Code West Palm Beach FL 33417-5811  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347617 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period  193.75
<b>C.</b>	Full Name (Last, First, Middle Initial) Michelle White  Mailing Address 504 W Perry St  City State Zip Code Lantana FL 33462-4548  Purpose of Disbursement Canvass Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347618 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period  362.50

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

1043.75

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Britney Wight-Hardae  Mailing Address 1023 Mango Dr  City Delray Beach State FL Zip Code 33444-2286  Purpose of Disbursement Canvass 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: D347606 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 325.00
B.	Full Name (Last, First, Middle Initial) Charletha Williams  Mailing Address 632 SW Avenue C PI Apt 3  City Belle Glade State FL Zip Code 33430-5874  Purpose of Disbursement Canvass 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: D347605 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 162.50
C.	Full Name (Last, First, Middle Initial) Lois Williams  Mailing Address 3861 NW 4th Ct  City Fort Lauderdale State FL Zip Code 33311-8223  Purpose of Disbursement Canvass 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: D347604 Date of Disbursement 11 / 30 / 2010  Amount of Each Disbursement this Period 512.50

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

1000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mike Williams</p> <p>Mailing Address PO Box 11826</p> <p>City West Palm Beach State FL Zip Code 33419-1826</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347614 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Shamal Williams</p> <p>Mailing Address 10941 Winding Creek Ln</p> <p>City Boca Raton State FL Zip Code 33428-5664</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347608 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 337.50</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Donell Wilson</p> <p>Mailing Address 1739 Morgans Mill Cir</p> <p>City Orlando State FL Zip Code 32825-8292</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347504 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p>

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

912.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michael M. Wilson	Transaction ID: D347545 Date of Disbursement 12 / 20 / 2010
	Mailing Address 4739 Langdale Dr	Amount of Each Disbursement this Period 620.00
	City Orlando State FL Zip Code 32808-2081	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael M. Wilson	Transaction ID: D379594 Date of Disbursement 11 / 30 / 2010
	Mailing Address 4739 Langdale Dr	Amount of Each Disbursement this Period 620.00
	City Orlando State FL Zip Code 32808-2081	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Priscilla Wilson	Transaction ID: D347607 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1350 N Dixie Hwy Apt 38	Amount of Each Disbursement this Period 37.50
	City Boca Raton State FL Zip Code 33432-1830	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1277.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Rachel Wilson	Transaction ID: D379618 Date of Disbursement 11 / 30 / 2010
	Mailing Address 8401 Lake Worth Road	Amount of Each Disbursement this Period 112.50
	City Lake Worth State FL Zip Code 33467-2400	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Saavedra Wilson	Transaction ID: D349865 Date of Disbursement 11 / 30 / 2010
	Mailing Address 8401 Lake Worth Rd	Amount of Each Disbursement this Period 450.00
	City Lake Worth State FL Zip Code 33467-2427	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Winning Connections, Inc.	Transaction ID: D346690 Date of Disbursement 12 / 01 / 2010
	Mailing Address 317 Pennsylvania Ave SE Ste 2	Amount of Each Disbursement this Period 9368.00
	City Washington State DC Zip Code 20003-1272	
	Purpose of Disbursement Generic Telephone Calls	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9930.50
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michael Woods	Transaction ID: D349864 Date of Disbursement 11 / 30 / 2010
	Mailing Address 801 Arthur Godfrey Rd	Amount of Each Disbursement this Period 112.50
	City Miami Beach State FL Zip Code 33140-3323	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Camilo Yepes	Transaction ID: D347600 Date of Disbursement 11 / 30 / 2010
	Mailing Address 422 S K St	Amount of Each Disbursement this Period 193.75
	City Lake Worth State FL Zip Code 33460-4510	
	Purpose of Disbursement Canvass Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Carmine's Seventh Avenue	Transaction ID: D364069 Date of Disbursement 12 / 14 / 2010
	Mailing Address 1802 E 7th Ave	Amount of Each Disbursement this Period 101.61
	City Tampa State FL Zip Code 33605-3808	
	Purpose of Disbursement Dinner Meeting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	306.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 234

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)  
Southwest Airlines

Mailing Address 2425 Wyman St

City Dallas State TX Zip Code 75235-2501

Purpose of Disbursement  
Air Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D364067  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Subway - Corporate

Mailing Address 325 Bic Dr

City Milford State CT Zip Code 06461-3072

Purpose of Disbursement  
Lunch Meeting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D364068  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ►

TOTAL This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b> Full Name (Last, First, Middle Initial) Elieth Carrillo</p> <p>Mailing Address 9273 SW 8th St Apt 315</p> <p>City Boca Raton State FL Zip Code 33428-6872</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347659 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Checkmate Consulting</p> <p>Mailing Address 3509 Connecticut Ave NW # 1075</p> <p>City Washington State DC Zip Code 20008-2400</p> <p>Purpose of Disbursement Generic Mail</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><b>Transaction ID:</b> D349602 <b>Date of Disbursement</b> 12 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 25312.09</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John DeCastro</p> <p>Mailing Address 5200 NE 14th Way Apt 408</p> <p>City Fort Lauderdale State FL Zip Code 33334-4965</p> <p>Purpose of Disbursement Canvass 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><b>Transaction ID:</b> D347641 <b>Date of Disbursement</b> 11 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 468.75</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

25880.84

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Shanise Johnson	Transaction ID: D382749 Date of Disbursement 11 / 30 / 2010
	Mailing Address 8401 Lake Worth Rd	Amount of Each Disbursement this Period 237.50
	City Lake Worth State FL Zip Code 33467-2400	
	Purpose of Disbursement Salary 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) Mauricio Lamas	Transaction ID: D382389 Date of Disbursement 12 / 15 / 2010
	Mailing Address 23141 SW 124th Ave	Amount of Each Disbursement this Period -923.50
	City Miami State FL Zip Code 33170-6309	
	Purpose of Disbursement Prior Period Void 9/30/2010 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) Jason Lutin	Transaction ID: D346350 Date of Disbursement 11 / 30 / 2010
	Mailing Address 2540 NW 24th St	Amount of Each Disbursement this Period 1967.92
	City Boca Raton State FL Zip Code 33434-4359	
	Purpose of Disbursement Salary 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) ..... ▶

1281.92

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A.</b> Full Name (Last, First, Middle Initial) Joshua Lyke <hr/> Mailing Address 801 Arthur Godfrey Rd <hr/> City Miami Beach State FL Zip Code 33140-3323 Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D382731 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 387.50
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Geoffrey Robbins <hr/> Mailing Address 1322 N K St <hr/> City Lake Worth State FL Zip Code 33460-1815 Purpose of Disbursement Canvass Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D347731 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Willie Smith <hr/> Mailing Address 3826 Stonemont Dr <hr/> City Cocoa State FL Zip Code 32926-6425 Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D382732 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 293.75
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	781.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	29806.51

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 176 / 234
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Production Resource Group			Nature of Debt (Purpose): Audio Visual/Conference
Mailing Address 1902 Cypress Lake Dr			
City Orlando	State FL	ZIP Code 32837-8458	

Outstanding Balance Beginning This Period		<b>Transaction ID: D119404</b>	
18541.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	18541.50	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	18541.50
2) <b>TOTALS</b> This Period (last page this line number only).....	18541.50
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	18541.50

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> 1-800-Flowers.Com Mailing Address 1 Old Country Rd Ste 500 City State Zip Code Carle Place NY 11514-1847 Purpose of Disbursement: Flowers Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 12 / 20 / 2010 <b>Transaction ID:</b> D347879
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.69		62.79		79.48

<b>B. Full Name (Last, First, Middle Initial)</b> Alyssa Miller Mailing Address 900 Riggins Rd Apt 723 City State Zip Code Tallahassee FL 32308-2220 Purpose of Disbursement: Salary Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 11 / 30 / 2010 <b>Transaction ID:</b> D346338
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.03		1023.36		1295.39

<b>C. Full Name (Last, First, Middle Initial)</b> Alyssa Miller Mailing Address 900 Riggins Rd Apt 723 City State Zip Code Tallahassee FL 32308-2220 Purpose of Disbursement: Salary Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 12 / 30 / 2010 <b>Transaction ID:</b> D349513
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.03		1023.36		1295.39

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
560.75		2109.51		2670.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Alyssa Miller			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 900 Riggins Rd   Apt 723			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D347893			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	1	0																
Tallahassee	FL	32308-2220																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
497.36		1871.02		2368.38

<b>B. Full Name (Last, First, Middle Initial)</b> Alyssa Miller			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 900 Riggins Rd   Apt 723			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D346932			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	1	0																
Tallahassee	FL	32308-2220																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.03		1023.35		1295.38

<b>C. Full Name (Last, First, Middle Initial)</b> Ms. Anne O Morgan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 741 W Keller St			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D346330			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0																
Hernando	FL	34442-8810																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
610.63		2297.15		2907.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1380.02		5191.52		6571.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address  
741 W Keller St

City State Zip Code  
Hernando FL 34442-8810

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 30 / 2010

Transaction ID: D349506

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
610.63 + 2297.14 = 2907.77

**B. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address  
741 W Keller St

City State Zip Code  
Hernando FL 34442-8810

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 10 / 2010

Transaction ID: D346916

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
1111.44 + 4181.14 = 5292.58

**C. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address  
741 W Keller St

City State Zip Code  
Hernando FL 34442-8810

Purpose of Disbursement:  
Salary

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 15 / 2010

Transaction ID: D346924

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
610.63 + 2297.14 = 2907.77

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
2332.70 + 8775.42 = 11108.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Avis Rent A Car - Corporate  
Mailing Address  
6 Sylvan Way  
City State Zip Code  
Parsippany NJ 07054-3826  
Purpose of Disbursement:  
Auto Travel  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 11 / 29 / 2010  
Transaction ID: D345690

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		3.16		4.00

**B. Full Name (Last, First, Middle Initial)**  
Bella Bella  
Mailing Address  
123 E 5th Ave  
City State Zip Code  
Tallahassee FL 32303-6122  
Purpose of Disbursement:  
Dinner Meeting  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 16 / 2010  
Transaction ID: D347877

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
326.79		1229.35		1556.14

**C. Full Name (Last, First, Middle Initial)**  
Best Buy Corporate  
Mailing Address  
7601 Penn Ave S  
City State Zip Code  
Minneapolis MN 55423-3645  
Purpose of Disbursement:  
Admin Office Supplies  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 21 / 2010  
Transaction ID: D349627

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.89		1019.08		1289.97

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
598.52		2251.59		2850.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Blue Cross and Blue Shield of Florida			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2210			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32203-2210	Date <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Benefits			Transaction ID: D347587		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1137.64		4279.70		5417.34

<b>B. Full Name (Last, First, Middle Initial)</b> Blue State Digital, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 734 15th St NW   Ste 1200			Allocated Activity or Event Year-To-Date 1263480.49		
City Washington	State DC	Zip Code 20005-1013	Date <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Website			Transaction ID: D347591		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.77		1082.58		1370.35

<b>C. Full Name (Last, First, Middle Initial)</b> Capital Business Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1851 S Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-5527	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Lease/Rent			Transaction ID: D346686		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.19		147.41		186.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1464.60		5509.69		6974.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Carr, Riggs, & Ingram  
Mailing Address  
1713 Mahan Dr  
City State Zip Code  
Tallahassee FL 32308-1218  
Purpose of Disbursement:  
Consulting/ Accounting  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 09 / 2010  
Transaction ID: D347592

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
589.15		2216.35		2805.50

**B. Full Name (Last, First, Middle Initial)**  
Century Link  
Mailing Address  
PO Box 96064  
City State Zip Code  
Charlotte NC 28296-0064  
Purpose of Disbursement:  
Admin Telephone  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 11 / 30 / 2010  
Transaction ID: D346682

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.97		199.27		252.24

**C. Full Name (Last, First, Middle Initial)**  
Ms. Christina Boltin  
Mailing Address  
2413 Bayshore Blvd  
City State Zip Code  
Tampa FL 33629-7333  
Purpose of Disbursement:  
Salary  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 10 / 2010  
Transaction ID: D346914

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
681.14		2562.40		3243.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1323.26		4978.02		6301.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2413 Bayshore Blvd			Allocated Activity or Event Year-To-Date 1263480.49		
City Tampa	State FL	Zip Code 33629-7333	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D346922		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.68		1394.45		1765.13

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2413 Bayshore Blvd			Allocated Activity or Event Year-To-Date 1263480.49		
City Tampa	State FL	Zip Code 33629-7333	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D346328		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.68		1394.44		1765.12

<b>C. Full Name (Last, First, Middle Initial)</b> Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2413 Bayshore Blvd			Allocated Activity or Event Year-To-Date 1263480.49		
City Tampa	State FL	Zip Code 33629-7333	Date <input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D349504		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
188.54		803.79		992.33

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
929.90		3592.68		4522.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Christopher Lazo Mailing Address 1951 N Meridian Rd Apt 28 City State Zip Code Tallahassee FL 32303-5249 Purpose of Disbursement: Salary Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 11 / 30 / 2010 <b>Transaction ID:</b> D346345
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

<b>B. Full Name (Last, First, Middle Initial)</b> Christopher Lazo Mailing Address 1951 N Meridian Rd Apt 28 City State Zip Code Tallahassee FL 32303-5249 Purpose of Disbursement: Salary Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 12 / 15 / 2010 <b>Transaction ID:</b> D346931
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

<b>C. Full Name (Last, First, Middle Initial)</b> City of Tallahassee Mailing Address 600 N Monroe St City State Zip Code Tallahassee FL 32301-1262 Purpose of Disbursement: Admin Utilities Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 11 / 30 / 2010 <b>Transaction ID:</b> D346649
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
412.36		1551.26		1963.62

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
766.92		2885.06		3651.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Comcast  
Mailing Address  
PO Box 105184  
City Atlanta State GA Zip Code 30348-5184  
Purpose of Disbursement:  
Admin Internet  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 22 / 2010  
Transaction ID: D347854

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.03		229.57		290.60

**B. Full Name (Last, First, Middle Initial)**  
Comcast  
Mailing Address  
PO Box 105184  
City Atlanta State GA Zip Code 30348-5184  
Purpose of Disbursement:  
Admin Internet  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 11 / 30 / 2010  
Transaction ID: D346687

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.70		235.89		298.59

**C. Full Name (Last, First, Middle Initial)**  
David Browne  
Mailing Address  
417 S Paloma PI  
City Tampa State FL Zip Code 33609-3711  
Purpose of Disbursement:  
Salary  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 11 / 30 / 2010  
Transaction ID: D346347

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
411.80		1549.14		1960.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.53		2014.60		2550.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> David Browne			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 417 S Paloma Pl			Allocated Activity or Event Year-To-Date 1263480.49		
City Tampa	State FL	Zip Code 33609-3711	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D346934		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.16		365.51		462.67

<b>B. Full Name (Last, First, Middle Initial)</b> DeltaCom1058			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 740597			Allocated Activity or Event Year-To-Date 1263480.49		
City Atlanta	State GA	Zip Code 30374-0597	Date <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Telephone			Transaction ID: D347584		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.39		359.75		444.14

<b>C. Full Name (Last, First, Middle Initial)</b> Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 1263480.49		
City Melbourne	State FL	Zip Code 32904-9515	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D346329		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.71		1580.65

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
513.49		1973.97		2487.46

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Eric Jotkoff  
**Mailing Address**  
3607 Eagle Nest Ct  
**City** Melbourne **State** FL **Zip Code** 32904-9515  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** 12 / 30 / 2010  
**Transaction ID:** D349505

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.71		1580.65

**B. Full Name (Last, First, Middle Initial)**  
Eric Jotkoff  
**Mailing Address**  
3607 Eagle Nest Ct  
**City** Melbourne **State** FL **Zip Code** 32904-9515  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** 12 / 15 / 2010  
**Transaction ID:** D346923

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.71		1580.65

**C. Full Name (Last, First, Middle Initial)**  
Eric Jotkoff  
**Mailing Address**  
3607 Eagle Nest Ct  
**City** Melbourne **State** FL **Zip Code** 32904-9515  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** 12 / 10 / 2010  
**Transaction ID:** D346915

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
615.00		2313.58		2928.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1278.88		4811.00		6089.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Everest National Insurance Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 917807			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Orlando	FL	32891-7807			
Purpose of Disbursement: Benefits			Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346648		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
316.55		1190.82		1507.37

<b>B. Full Name (Last, First, Middle Initial)</b> Everest National Insurance Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 917807			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Orlando	FL	32891-7807			
Purpose of Disbursement: Benefits			Date <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D347593		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.95		285.71		361.66

<b>C. Full Name (Last, First, Middle Initial)</b> Gabrielle Ann Arcangeli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 155 Whetherbine Way W			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32301-8538			
Purpose of Disbursement: Salary			Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346336		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.62		1074.48		1360.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.12		2551.01		3229.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Gabrielle Ann Arcangeli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 155 Whetherbine Way W			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-8538	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346920		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
520.32		1957.41		2477.73

<b>B. Full Name (Last, First, Middle Initial)</b> Gabrielle Ann Arcangeli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 155 Whetherbine Way W			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-8538	Date M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D349511		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.62		1074.49		1360.11

<b>C. Full Name (Last, First, Middle Initial)</b> Gabrielle Ann Arcangeli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 155 Whetherbine Way W			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-8538	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346930		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.62		1074.48		1360.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1091.56		4106.38		5197.94

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Intermedia.Net  
**Mailing Address**  
156 W 56th St Ste 1601  
**City State Zip Code**  
New York NY 10019-3878  
**Purpose of Disbursement:**  
Admin Internet  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** MM / DD / YYYY  
12 / 02 / 2010  
**Transaction ID:** D347872

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
359.56		1352.64		1712.20

**B. Full Name (Last, First, Middle Initial)**  
Intermedia.Net  
**Mailing Address**  
156 W 56th St Ste 1601  
**City State Zip Code**  
New York NY 10019-3878  
**Purpose of Disbursement:**  
Admin Internet  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** MM / DD / YYYY  
12 / 03 / 2010  
**Transaction ID:** D347873

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.54		58.46		74.00

**C. Full Name (Last, First, Middle Initial)**  
Intermedia.Net  
**Mailing Address**  
156 W 56th St Ste 1601  
**City State Zip Code**  
New York NY 10019-3878  
**Purpose of Disbursement:**  
Admin Internet  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** MM / DD / YYYY  
12 / 03 / 2010  
**Transaction ID:** D347874

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.54		58.46		74.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
390.64		1469.56		1860.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Intermedia.Net  
**Mailing Address**  
156 W 56th St Ste 1601  
**City** New York **State** NY **Zip Code** 10019-3878  
**Purpose of Disbursement:**  
Admin Internet  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** 12 / 22 / 2010  
**Transaction ID:** D364056

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.73		2.74		3.47

**B. Full Name (Last, First, Middle Initial)**  
Intuit Software  
**Mailing Address**  
2632 Marine Way  
**City** Mountain View **State** CA **Zip Code** 94043-1126  
**Purpose of Disbursement:**  
Admin Office Supplies  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** 12 / 10 / 2010  
**Transaction ID:** D347866

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.19		72.17		91.36

**C. Full Name (Last, First, Middle Initial)**  
Jennifer Whitcomb  
**Mailing Address**  
710 13th Ave S  
**City** Jacksonville Beach **State** FL **Zip Code** 32250-5032  
**Purpose of Disbursement:**  
Printing/Graphics  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** 12 / 15 / 2010  
**Transaction ID:** D347835

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.42		114.41		144.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> John E Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2257 Collins Rd			Allocated Activity or Event Year-To-Date 1263480.49	
City	State	Zip Code	Category/ Type	
Cairo	GA	39828-4917		
Purpose of Disbursement: Salary			Date <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y</span> 1 1 / 3 0 / 2 0 1 0 <b>Transaction ID:</b> D346346	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.59		265.56		336.15

<b>B. Full Name (Last, First, Middle Initial)</b> John E Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2257 Collins Rd			Allocated Activity or Event Year-To-Date 1263480.49	
City	State	Zip Code	Category/ Type	
Cairo	GA	39828-4917		
Purpose of Disbursement: Salary			Date <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y</span> 1 2 / 3 0 / 2 0 1 0 <b>Transaction ID:</b> D349515	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.54		303.00		383.54

<b>C. Full Name (Last, First, Middle Initial)</b> John E Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2257 Collins Rd			Allocated Activity or Event Year-To-Date 1263480.49	
City	State	Zip Code	Category/ Type	
Cairo	GA	39828-4917		
Purpose of Disbursement: Salary			Date <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y</span> 1 2 / 1 5 / 2 0 1 0 <b>Transaction ID:</b> D346933	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.09		429.20		543.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
265.22		997.76		1262.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Ms. Karen L. Thurman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 9067 SW 190th Avenue Rd			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D346928			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	1	0																
Dunnellon	FL	34432-2827																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.92		2554.03		3232.95

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Karen L. Thurman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 9067 SW 190th Avenue Rd			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D346335			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	1	0																
Dunnellon	FL	34432-2827																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.92		2554.03		3232.95

<b>C. Full Name (Last, First, Middle Initial)</b> Ms. Karen L. Thurman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 9067 SW 190th Avenue Rd			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D349510			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	0	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	2	/	3	0	/	2	0	1	0																
Dunnellon	FL	34432-2827																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
678.92		2554.03		3232.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2036.76		7662.09		9698.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Kyle Schulberg			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9886 N Kendall Dr   Apt H113			Allocated Activity or Event Year-To-Date 1263480.49		
City   State   Zip Code Miami   FL   33176-1827	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 11 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D346348		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
308.83		1161.80		1470.63

<b>B. Full Name (Last, First, Middle Initial)</b> Marpan Recycling			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6020 Woodville Hwy			Allocated Activity or Event Year-To-Date 1263480.49		
City   State   Zip Code Tallahassee   FL   32305-1200	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 12 / 20 / 2010		
Purpose of Disbursement: Trash Disposal			Transaction ID: D347880		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.57		5.93		7.50

<b>C. Full Name (Last, First, Middle Initial)</b> Marpan Recycling			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6020 Woodville Hwy			Allocated Activity or Event Year-To-Date 1263480.49		
City   State   Zip Code Tallahassee   FL   32305-1200	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 12 / 16 / 2010		
Purpose of Disbursement: Trash Disposal			Transaction ID: D349621		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.05		3.95		5.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
311.45		1171.68		1483.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Marpan Recycling			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6020 Woodville Hwy			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32305-1200	Date M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 1 0		
Purpose of Disbursement: Trash Disposal			Transaction ID: D349559		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.05		3.95		5.00

<b>B. Full Name (Last, First, Middle Initial)</b> Mary Brogan Museum of Art & Science			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 350 S Duval St			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-1711	Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0		
Purpose of Disbursement: Site Rental			Transaction ID: D346685		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mildred O. Smith			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3550 Esplanade Way   Apt 8107			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32311-3755	Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346331		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
317.53		1194.51		1512.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
423.58		1593.46		2017.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith  
**Mailing Address**  
3550 Esplanade Way Apt 8107  
**City State Zip Code**  
Tallahassee FL 32311-3755  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** MM / DD / YYYY  
12 / 30 / 2010  
**Transaction ID:** D349507

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
317.53		1194.51		1512.04

**B. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith  
**Mailing Address**  
3550 Esplanade Way Apt 8107  
**City State Zip Code**  
Tallahassee FL 32311-3755  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** MM / DD / YYYY  
12 / 15 / 2010  
**Transaction ID:** D346925

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
317.53		1194.53		1512.06

**C. Full Name (Last, First, Middle Initial)**  
Mildred O. Smith  
**Mailing Address**  
3550 Esplanade Way Apt 8107  
**City State Zip Code**  
Tallahassee FL 32311-3755  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1263480.49  
**Date** MM / DD / YYYY  
12 / 10 / 2010  
**Transaction ID:** D346917

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
574.78		2162.25		2737.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1209.84		4551.29		5761.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> NGP VAN, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1101 15th Street, NW Ste 50025 I St NW			Allocated Activity or Event Year-To-Date 1263480.49		
City Washington	State DC	Zip Code 20005-5918	Date MM / DD / YYYY 12 / 14 / 2010		
Purpose of Disbursement: Software/Compliance			Transaction ID: D347581		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

<b>B. Full Name (Last, First, Middle Initial)</b> Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr Apt A2-5			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32304-2868	Date MM / DD / YYYY 11 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D346334		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.66		1037.55

<b>C. Full Name (Last, First, Middle Initial)</b> Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr Apt A2-5			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32304-2868	Date MM / DD / YYYY 12 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D349509		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.66		1037.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
593.28		2231.82		2825.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr   Apt A2-5			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32304-2868	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346919		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
403.69		1518.66		1922.35

<b>B. Full Name (Last, First, Middle Initial)</b> Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr   Apt A2-5			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32304-2868	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346927		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.66		1037.55

<b>C. Full Name (Last, First, Middle Initial)</b> Office Depot-Corporate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 633211			Allocated Activity or Event Year-To-Date 1263480.49		
City Cincinnati	State OH	Zip Code 45263-3211	Date M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 1 0		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D347882		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.02		33.94		42.96

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.60		2372.26		3002.86

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> One Source Supply Center Mailing Address 5855 Green Valley Cir Ste 206 City State Zip Code Culver City CA 90230-6968 Purpose of Disbursement: Admin Office Supplies Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 1263480.49 _____ Date <table style="display: inline-table; border: 1px solid black;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> <b>Transaction ID:</b> D347795	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	2	0	/	2	0	1	0												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
484.35		1822.09		2306.44

<b>B. Full Name (Last, First, Middle Initial)</b> Osmond Johnson Janitorial Service Mailing Address 24131 Lake Talquin Rd City State Zip Code Tallahassee FL 32310-4603 Purpose of Disbursement: Janitorial Service Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 1263480.49 _____ Date <table style="display: inline-table; border: 1px solid black;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> <b>Transaction ID:</b> D346968	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	3	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	3	/	2	0	1	0												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

<b>C. Full Name (Last, First, Middle Initial)</b> Osmond Johnson Janitorial Service Mailing Address 24131 Lake Talquin Rd City State Zip Code Tallahassee FL 32310-4603 Purpose of Disbursement: Janitorial Service Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 1263480.49 _____ Date <table style="display: inline-table; border: 1px solid black;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> <b>Transaction ID:</b> D347577	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	7	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	7	/	2	0	1	0												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
715.35		2691.09		3406.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
PAC Strategies, LLC  
Mailing Address  
PO Box 7084  
City State Zip Code  
Alexandria VA 22307-0084  
Purpose of Disbursement:  
Consulting/Compliance  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 11 / 30 / 2010  
Transaction ID: D346689

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

**B. Full Name (Last, First, Middle Initial)**  
PAi  
Mailing Address  
PO Box 60  
City State Zip Code  
De Pere WI 54115-0060  
Purpose of Disbursement:  
Benefits  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 01 / 2010  
Transaction ID: D347881

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		105.07		133.00

**C. Full Name (Last, First, Middle Initial)**  
PAi  
Mailing Address  
PO Box 60  
City State Zip Code  
De Pere WI 54115-0060  
Purpose of Disbursement:  
Benefits  
Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
Allocated Activity or Event Year-To-Date  
1263480.49  
Date 12 / 16 / 2010  
Transaction ID: D349609

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		105.07		133.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.86		1395.14		1766.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32303-4727			
Purpose of Disbursement: Payroll Tax			Date <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D345676		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1730.72		6510.80		8241.52

<b>B. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32303-4727			
Purpose of Disbursement: Payroll Fees			Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346316		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.19		38.31		48.50

<b>C. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32303-4727			
Purpose of Disbursement: Payroll Taxes			Date <input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D345662		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.58		679.31		859.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1921.49		7228.42		9149.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Category/ Type																						
Tallahassee	FL	32303-4727																							
Purpose of Disbursement: Payroll Fees			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	4	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	2	4	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D345663																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.57		5.93		7.50

<b>B. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Category/ Type																						
Tallahassee	FL	32303-4727																							
Purpose of Disbursement: Salary			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	1	5	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D347894																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
198.08		844.46		1042.54

<b>C. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49																						
City	State	Zip Code	Category/ Type																						
Tallahassee	FL	32303-4727																							
Purpose of Disbursement: Payroll Fees			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	2	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	1	2	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D346911																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.55		35.95		45.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.20		886.34		1095.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address  
2069 N Monroe St

City State Zip Code  
Tallahassee FL 32303-4727

Purpose of Disbursement:  
Payroll Taxes

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 15 / 2010

Transaction ID: D346912

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
1470.22 + 5530.81 = 7001.03

**B. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address  
2069 N Monroe St

City State Zip Code  
Tallahassee FL 32303-4727

Purpose of Disbursement:  
Payroll Fees

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 15 / 2010

Transaction ID: D347895

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
1.57 + 5.93 = 7.50

**C. Full Name (Last, First, Middle Initial)**  
Payroll Matters

Mailing Address  
2069 N Monroe St

City State Zip Code  
Tallahassee FL 32303-4727

Purpose of Disbursement:  
Payroll Tax

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 30 / 2010

Transaction ID: D349387

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
1320.13 + 4966.21 = 6286.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
2791.92 + 10502.95 = 13294.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32303-4727			
Purpose of Disbursement: Payroll Fees			Date <input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D349388		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.92		33.58		42.50

<b>B. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32303-4727			
Purpose of Disbursement: Payroll Tax			Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346905		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2620.43		9857.81		12478.24

<b>C. Full Name (Last, First, Middle Initial)</b> Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32303-4727			
Purpose of Disbursement: Payroll Fees			Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346906		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.98		30.02		38.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2637.33		9921.41		12558.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Penske Truck Leasing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1851 S Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-5527	Date MM / DD / YYYY 12 / 09 / 2010		
Purpose of Disbursement: Auto Travel			Transaction ID: D349619		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.62		51.26		64.88

<b>B. Full Name (Last, First, Middle Initial)</b> Penske Truck Leasing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1851 S Monroe St			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-5527	Date MM / DD / YYYY 12 / 09 / 2010		
Purpose of Disbursement: Auto Travel			Transaction ID: D364052		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
83.42		313.82		397.24

<b>C. Full Name (Last, First, Middle Initial)</b> PitneyBowes			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 371896   PO Box 856042			Allocated Activity or Event Year-To-Date 1263480.49		
City Louisville	State KY	Zip Code 40285-6042	Date MM / DD / YYYY 12 / 08 / 2010		
Purpose of Disbursement: Admin Postage			Transaction ID: D346644		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.62		175.38		222.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.66		540.46		684.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Principal Financial Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 14416                      Dept. 900			Allocated Activity or Event Year-To-Date 1263480.49		
City Des Moines	State IA	Zip Code 50306-3416	Date M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 1 0		
Purpose of Disbursement: Benefits			Transaction ID: D347590		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
390.08		1467.46		1857.54

<b>B. Full Name (Last, First, Middle Initial)</b> Publix Super Markets, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. 32009                      PO Box 407			Allocated Activity or Event Year-To-Date 1263480.49		
City Lakeland	State FL	Zip Code 33802-0407	Date M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 1 0		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D349626		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.18		45.82		58.00

<b>C. Full Name (Last, First, Middle Initial)</b> Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371874                      P.O. Box 856042			Allocated Activity or Event Year-To-Date 1263480.49		
City Pittsburgh	State PA	Zip Code 15250-7874	Date M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 1 0		
Purpose of Disbursement: Admin Postage			Transaction ID: D346683		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
507.26		1908.28		2415.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Ricoh Americas Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21146 Network Pl			Allocated Activity or Event Year-To-Date 1263480.49		
City Chicago	State IL	Zip Code 60673-1211	Date MM / DD / YYYY 11 / 30 / 2010		
Purpose of Disbursement: Admin Lease/Rent			Transaction ID: D346688		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.00		850.20		1076.20

<b>B. Full Name (Last, First, Middle Initial)</b> Roly Poly			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2866 N University Dr			Allocated Activity or Event Year-To-Date 1263480.49		
City Coral Springs	State FL	Zip Code 33065-1427	Date MM / DD / YYYY 12 / 09 / 2010		
Purpose of Disbursement: Lunch Meeting			Transaction ID: D347869		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.21		27.14		34.35

<b>C. Full Name (Last, First, Middle Initial)</b> Roly Poly			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2866 N University Dr			Allocated Activity or Event Year-To-Date 1263480.49		
City Coral Springs	State FL	Zip Code 33065-1427	Date MM / DD / YYYY 12 / 15 / 2010		
Purpose of Disbursement: Lunch Meeting			Transaction ID: D349612		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.91		33.50		42.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
242.12		910.84		1152.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Sandler, Reiff & Young P.C.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 M St SE Ste 1102			Allocated Activity or Event Year-To-Date 1263480.49		
City Washington	State DC	Zip Code 20003-3437	Date MM / DD / YYYY 12 / 13 / 2010		
Purpose of Disbursement: Consulting/Legal			Transaction ID: D346971		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

<b>B. Full Name (Last, First, Middle Initial)</b> Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32207-4240	Date MM / DD / YYYY 12 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D349508		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
961.98		3618.86		4580.84

<b>C. Full Name (Last, First, Middle Initial)</b> Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32207-4240	Date MM / DD / YYYY 11 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D346332		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
961.98		3618.86		4580.84

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2175.96		8185.72		10361.68

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32207-4240	Date M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346926		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
961.98		3618.86		4580.84

<b>B. Full Name (Last, First, Middle Initial)</b> Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32207-4240	Date M M / D D / Y Y Y Y 1 2 / 1 0 / 2 0 1 0		
Purpose of Disbursement: Salary			Transaction ID: D346918		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1779.42		6694.01		8473.43

<b>C. Full Name (Last, First, Middle Initial)</b> Service Office Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15038			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32317-5038	Date M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 1 0		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D346645		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.70		74.12		93.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2761.10		10386.99		13148.09

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Stephen Carville			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2401 W Morrison Ave   6610 Burden Ln			Allocated Activity or Event Year-To-Date 1263480.49																						
City Tampa	State FL	Zip Code 33629-4756	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	1	/	3	0	/	2	0	1	0																
Purpose of Disbursement: Salary			Transaction ID: D346349																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

<b>B. Full Name (Last, First, Middle Initial)</b> T-Mobile			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 742596			Allocated Activity or Event Year-To-Date 1263480.49																						
City Cincinnati	State OH	Zip Code 45274-2596	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	8	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	0	8	/	2	0	1	0																
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D346646																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.48		92.10		116.58

<b>C. Full Name (Last, First, Middle Initial)</b> Technology Services Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4979 Glen Castle Dr			Allocated Activity or Event Year-To-Date 1263480.49																						
City Tallahassee	State FL	Zip Code 32309-2959	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	9	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
1	2	/	0	9	/	2	0	1	0																
Purpose of Disbursement: Consulting/IT			Transaction ID: D346732																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1251.76		4709.00		5960.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Tracy N Henderson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 213 Young St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32301-5437			
Purpose of Disbursement: Salary			Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346337		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.59		965.27		1221.86

<b>B. Full Name (Last, First, Middle Initial)</b> Tracy N Henderson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 213 Young St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32301-5437			
Purpose of Disbursement: Salary			Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346921		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
470.73		1770.83		2241.56

<b>C. Full Name (Last, First, Middle Initial)</b> Tracy N Henderson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 213 Young St			Allocated Activity or Event Year-To-Date 1263480.49		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32301-5437			
Purpose of Disbursement: Salary			Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D346929		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.59		965.27		1221.86

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
983.91		3701.37		4685.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
Tracy N Henderson

Mailing Address  
213 Young St

City Tallahassee	State FL	Zip Code 32301-5437	Category/ Type
Purpose of Disbursement: Salary			

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date  /  /   
**Transaction ID:** D349512

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.59		965.27		1221.86

**B. Full Name (Last, First, Middle Initial)**  
United States Post Office

Mailing Address  
2700 Campus Dr

City San Mateo	State CA	Zip Code 94497-0001	Category/ Type
Purpose of Disbursement: Admin Shipping			

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date  /  /   
**Transaction ID:** D364058

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.87		10.78		13.65

**C. Full Name (Last, First, Middle Initial)**  
United States Postal Service

Mailing Address  
2825 Lone Oak Pkwy    Accounting Service Center

City Eagan	State MN	Zip Code 55121-1551	Category/ Type
Purpose of Disbursement: Admin Shipping			

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date  /  /   
**Transaction ID:** D349615

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
263.11		989.80		1252.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2825 Lone Oak Pkwy   Accounting Service Center			Allocated Activity or Event Year-To-Date 1263480.49	
City Eagan	State MN	Zip Code 55121-1551	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 2 / 0 1 / 2 0 1 0 <b>Transaction ID:</b> D347883	
Purpose of Disbursement: Admin Office Supplies				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

<b>B. Full Name (Last, First, Middle Initial)</b> United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2825 Lone Oak Pkwy   Accounting Service Center			Allocated Activity or Event Year-To-Date 1263480.49	
City Eagan	State MN	Zip Code 55121-1551	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 2 / 0 1 / 2 0 1 0 <b>Transaction ID:</b> D347884	
Purpose of Disbursement: Admin Shipping				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

<b>C. Full Name (Last, First, Middle Initial)</b> UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 72470244			Allocated Activity or Event Year-To-Date 1263480.49	
City Philadelphia	State PA	Zip Code 19170-0001	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 1 / 3 0 / 2 0 1 0 <b>Transaction ID:</b> D346684	
Purpose of Disbursement: Admin Shipping				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.06		252.25		319.31

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.36		279.75		354.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> WalMart Stores, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 702 SW 8th St			Allocated Activity or Event Year-To-Date 1263480.49		
City Bentonville	State AR	Zip Code 72716-6209	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D345630		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.97		25.44		31.41

<b>B. Full Name (Last, First, Middle Initial)</b> WalMart Stores, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 702 SW 8th St			Allocated Activity or Event Year-To-Date 1263480.49		
City Bentonville	State AR	Zip Code 72716-6209	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D347878		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.45		39.29		49.74

<b>C. Full Name (Last, First, Middle Initial)</b> WebDomains4u.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14455 N Hayden Rd Ste 219			Allocated Activity or Event Year-To-Date 1263480.49		
City Scottsdale	State AZ	Zip Code 85260-6993	Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D364054		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.14		8.03		10.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.56		72.76		91.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
WebDomains4u.com

Mailing Address  
14455 N Hayden Rd Ste 219

City State Zip Code  
Scottsdale AZ 85260-6993

Purpose of Disbursement:  
Admin Internet

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date 12 / 21 / 2010  
Transaction ID: D364055

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.27		16.07		20.34

**B. Full Name (Last, First, Middle Initial)**  
Scott Arceneaux

Mailing Address  
1544 Lorimier Rd

City State Zip Code  
Jacksonville FL 32207-4240

Purpose of Disbursement:  
Staff Reimbursement

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date 12 / 06 / 2010  
Transaction ID: D346572

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.04		778.88		985.92

**C. Full Name (Last, First, Middle Initial)**  
Polos on Park

Mailing Address  
2626 E Park Ave

City State Zip Code  
Tallahassee FL 32301-0802

Purpose of Disbursement:  
Lodging

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date 12 / 06 / 2010  
Transaction ID: D346573

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.04		778.88		985.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.31		794.95		1006.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Ms. Anne O Morgan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 741 W Keller St			Allocated Activity or Event Year-To-Date 1263480.49		
City Hernando	State FL	Zip Code 34442-8810	Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D346575		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Blue Cross and Blue Shield of Florida			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2210			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32203-2210	Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Benefits			Transaction ID: D346576		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

<b>C. Full Name (Last, First, Middle Initial)</b> Kyle Schulberg			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9886 N Kendall Dr   Apt H113			Allocated Activity or Event Year-To-Date 1263480.49		
City Miami	State FL	Zip Code 33176-1827	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D346691		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.37		84.17		106.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.37		479.17		606.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> AT&T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address PO Box 538695			Allocated Activity or Event Year-To-Date 1263480.49																	
City                      State                      Zip Code Atlanta                      GA                      30353-8695			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>3</td><td>0</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	1	1	D	D	3	0	Y	Y	Y	Y	2	0	1	0
M	M																			
1	1																			
D	D																			
3	0																			
Y	Y	Y	Y																	
2	0	1	0																	
Purpose of Disbursement: Admin Cell Phone		Category/ Type	Transaction ID: D346692																	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.37		84.17		106.54

<b>B. Full Name (Last, First, Middle Initial)</b> Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 1263480.49																	
City                      State                      Zip Code Melbourne                      FL                      32904-9515			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>2</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	1	2	D	D	0	1	Y	Y	Y	Y	2	0	1	0
M	M																			
1	2																			
D	D																			
0	1																			
Y	Y	Y	Y																	
2	0	1	0																	
Purpose of Disbursement: Staff Reimbursement		Category/ Type	Transaction ID: D346698																	
Activity or Event Identifier: Administrative																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.81		123.42		156.23

<b>C. Full Name (Last, First, Middle Initial)</b> Papa John's Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address PO Box 4209			Allocated Activity or Event Year-To-Date 1263480.49																	
City                      State                      Zip Code Tallahassee                      FL                      32315-4209			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>2</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>1</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	1	2	D	D	0	1	Y	Y	Y	Y	2	0	1	0
M	M																			
1	2																			
D	D																			
0	1																			
Y	Y	Y	Y																	
2	0	1	0																	
Purpose of Disbursement: Lunch Meeting		Category/ Type	Transaction ID: D346699																	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.81		123.42		156.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.81		123.42		156.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Christopher Lazo Mailing Address 1951 N Meridian Rd Apt 28 City State Zip Code Tallahassee FL 32303-5249 Purpose of Disbursement: Staff Reimbursement Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 12 / 13 / 2010 <b>Transaction ID:</b> D346969
---	--

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.72		156.94		198.66

<b>B. Full Name (Last, First, Middle Initial)</b> Shell Gas - Corporate Mailing Address PO Box 2463 City State Zip Code Houston TX 77252-2463 Purpose of Disbursement: Auto Travel Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 12 / 13 / 2010 <b>Transaction ID:</b> D346970
--	--

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.72		156.94		198.66

<b>C. Full Name (Last, First, Middle Initial)</b> Ms. Christina Boltin Mailing Address 2413 Bayshore Blvd City State Zip Code Tampa FL 33629-7333 Purpose of Disbursement: Staff Reimbursement Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1263480.49 Date MM / DD / YYYY 12 / 13 / 2010 <b>Transaction ID:</b> D346973
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.92		251.74		318.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> AT&T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 538695			Allocated Activity or Event Year-To-Date 1263480.49		
City Atlanta	State GA	Zip Code 30353-8695	Date <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D346974		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Karen L. Thurman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9067 SW 190th Avenue Rd			Allocated Activity or Event Year-To-Date 1263480.49		
City Dunnellon	State FL	Zip Code 34432-2827	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D347579		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

<b>C. Full Name (Last, First, Middle Initial)</b> Doveree Properties, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 310 W Jefferson St   Attn: Mr. Leonard Pepper			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32301-1419	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Lodging			Transaction ID: D347580		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 1263480.49		
City Jacksonville	State FL	Zip Code 32207-4240	Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D347793		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.15		117.17		148.32

<b>B. Full Name (Last, First, Middle Initial)</b> AT&T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 538695			Allocated Activity or Event Year-To-Date 1263480.49		
City Atlanta	State GA	Zip Code 30353-8695	Date <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D347794		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.15		117.17		148.32

<b>C. Full Name (Last, First, Middle Initial)</b> Christopher Lazo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1951 N Meridian Rd   Apt 28			Allocated Activity or Event Year-To-Date 1263480.49		
City Tallahassee	State FL	Zip Code 32303-5249	Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D347831		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		14.46		18.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.99		131.63		166.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A. Full Name (Last, First, Middle Initial)**  
United States Postal Service

Mailing Address  
2825 Lone Oak Pkwy Accounting Service Center

City	State	Zip Code
Eagan	MN	55121-1551

Purpose of Disbursement:  
Admin Shipping

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date 12 / 15 / 2010  
**Transaction ID:** D347832

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		14.46		18.30

**B. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address  
741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:  
Staff Reimbursement

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date 12 / 15 / 2010  
**Transaction ID:** D347833

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.15		546.05		691.20

**C. Full Name (Last, First, Middle Initial)**  
Ms. Anne O Morgan

Mailing Address  
741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:  
Auto Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1263480.49

Date 12 / 15 / 2010  
**Transaction ID:** D347834

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.15		546.05		691.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.15		546.05		691.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<b>A. Full Name (Last, First, Middle Initial)</b> Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 1263480.49		
City Melbourne	State FL	Zip Code 32904-9515	Date <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D364065		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
151.53		570.02		721.55

<b>B. Full Name (Last, First, Middle Initial)</b> 7-Eleven Corporate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2711 N Haskell Ave			Allocated Activity or Event Year-To-Date 1263480.49		
City Dallas	State TX	Zip Code 75204-2911	Date <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Lunch Meeting			Transaction ID: D364070		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.46		6.21		7.67

<b>C. Full Name (Last, First, Middle Initial)</b> Comfort Inn Corporate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10750 Columbia Pike			Allocated Activity or Event Year-To-Date 1263480.49		
City Silver Spring	State MD	Zip Code 20901-4402	Date <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Travel/Lodging			Transaction ID: D364072		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.31		87.68		110.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
151.53		570.02		721.55

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

**A.** Full Name (Last, First, Middle Initial)  
E-Z Rent-A-Car

Mailing Address  
7900 S Conway Rd Orlando International Airport

City State Zip Code  
Orlando FL 32812-4000

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 14 / 2010

Transaction ID: D364071

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.47		39.40		49.87

**B.** Full Name (Last, First, Middle Initial)  
Tampa Airport Parking

Mailing Address  
5503 W Spruce St

City State Zip Code  
Tampa FL 33607-5923

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1263480.49

Date MM / DD / YYYY  
12 / 14 / 2010

Transaction ID: D364066

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.93		26.07		33.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
37436.07	141070.08	178506.15

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: **SchedL1**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT  
NF expenses

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	345000.00	355000.00
b. Unitemized.....	0.00	0.00
c. Total.....	345000.00	355000.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	345000.00	355000.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	355000.00	355000.00
e. Total.....	355000.00	355000.00
5. OTHER DISBURSEMENTS.....	0.00	23405.22
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	355000.00	378405.22
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	0.00	0.00
8. RECEIPTS..... (from Line 3)	345000.00	355000.00
9. SUBTOTAL..... (Add Lines 7 and 8)	345000.00	355000.00
10. DISBURSEMENTS..... (From Line 6)	355000.00	378405.22
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	-10000.00	-23405.22

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. Advance America</b>			<b>Transaction ID:</b> C4924196 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0
Mailing Address 135 N Church St			Amount of Each Receipt this Period 5000.00
City Spartanburg	State SC	Zip Code 29306-5138	Aggregate Year-to-Date 5000.00
Name of Employer or Principal Place of Business Advance America			<b>Account:</b> Monetary
Occupation Check Cashing			
Full Name (Last, First, Middle Initial) <b>B. ARDA ROC-PAC</b>			<b>Transaction ID:</b> C4978474 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Mailing Address 1201 15th St NW FL 4			Amount of Each Receipt this Period 10000.00
City Washington	State DC	Zip Code 20005-2842	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business ARDA ROC-PAC			<b>Account:</b> Monetary
Occupation PAC			
Full Name (Last, First, Middle Initial) <b>C. BC Property Investments, L. C.</b>			<b>Transaction ID:</b> C4780294 Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0
Mailing Address 4500 Biscayne Blvd Ste 360			Amount of Each Receipt this Period 10000.00
City Miami	State FL	Zip Code 33137-3233	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business BC Property Investments,			<b>Account:</b> Monetary
Occupation Real Estate			
Full Name (Last, First, Middle Initial) <b>D. Benderson Management Services, LLC</b>			<b>Transaction ID:</b> C4978558 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
Mailing Address 570 Delaware Ave			Amount of Each Receipt this Period 10000.00
City Buffalo	State NY	Zip Code 14202-1207	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Benderson Management Serv-			<b>Account:</b> Monetary
Occupation Management Service			
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			35000.00
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. Blue Cross and Blue Shield of Florida</b>			Transaction ID: C4923042 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 1 0
Mailing Address PO Box 2210			Amount of Each Receipt this Period 10000.00
City Jacksonville	State FL	Zip Code 32203-2210	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Blue Cross and Blue Shield of Florida			Account: Monetary
Occupation Health Insurance Company			
Full Name (Last, First, Middle Initial) <b>B. CEMEX Materials LLC</b>			Transaction ID: C4961373 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
Mailing Address 1501 Belvedere Rd			Amount of Each Receipt this Period 10000.00
City West Palm Beach	State FL	Zip Code 33406-1501	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business CEMEX Materials LLC			Account: Monetary
Occupation Building material industry			
Full Name (Last, First, Middle Initial) <b>C. Centene Management Company LLC</b>			Transaction ID: C4924117 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0
Mailing Address Centene Corporation			Amount of Each Receipt this Period 10000.00
City St Louis	State MO	Zip Code 63105	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Centene Management Company LLC			Account: Monetary
Occupation Healthcare			
Full Name (Last, First, Middle Initial) <b>D. Century Towers Associates</b>			Transaction ID: C4924182 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0
Mailing Address PO Box 1806			Amount of Each Receipt this Period 10000.00
City Hialeah	State FL	Zip Code 33011	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Century Towers Associates			Account: Monetary
Occupation Real Estate			
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			40000.00
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
for each category of the  
Aggregation Page

FOR LINE NUMBER:  1a  2  
(check only one)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. CSX Transportation, Inc.</b>			<b>Transaction ID:</b> C4961153 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
Mailing Address 500 Water St # J-420			Amount of Each Receipt this Period 10000.00
City Jacksonville	State FL	Zip Code 32202-4423	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business CSX Transportation, Inc.			<b>Account:</b> Monetary
Occupation Railroad Transportation Company			
Full Name (Last, First, Middle Initial) <b>B. Culpepper &amp; Kurland, P.A.</b>			<b>Transaction ID:</b> C4961752 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
Mailing Address 101 E Kennedy Blvd			Amount of Each Receipt this Period 10000.00
City Tampa	State FL	Zip Code 33602-5179	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business			<b>Account:</b> Monetary
Occupation Retired			
Full Name (Last, First, Middle Initial) <b>C. Dosal Tobacco Company</b>			<b>Transaction ID:</b> C4981151 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
Mailing Address 4775 NW 132nd St			Amount of Each Receipt this Period 10000.00
City Opa Locka	State FL	Zip Code 33054-4313	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Dosal Tobacco			<b>Account:</b> Monetary
Occupation Tobacco Company			
Full Name (Last, First, Middle Initial) <b>D. Farmer, Jaffe, Weissing, Edwards</b>			<b>Transaction ID:</b> C4961204 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
Mailing Address 425 N Andrews Ave Ste 2			Amount of Each Receipt this Period 10000.00
City Fort Lauderdale	State FL	Zip Code 33301-3268	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Farmer, Jaffe, Weissing, Edwards			<b>Account:</b> Monetary
Occupation Law Firm			
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			40000.00
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b> Full Name (Last, First, Middle Initial) Florida AFL-CIO Cope Individual Fund</p> <p>Mailing Address 135 S Monroe St</p> <p>City Tallahassee State FL Zip Code 32301-4100</p> <p>Name of Employer or Principal Place of Business Florida AFL-CIO</p> <p>Occupation Labor Union</p>	<p><b>Transaction ID:</b>C4961202</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Florida Citrus Mutual State Committee of Continuou</p> <p>Mailing Address PO Box 89</p> <p>City Lakeland State FL Zip Code 33802-0089</p> <p>Name of Employer or Principal Place of Business Fla Citrus Mutual State</p> <p>Occupation Agriculture</p>	<p><b>Transaction ID:</b>C4961263</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Florida Education Association</p> <p>Mailing Address 213 S Adams St</p> <p>City Tallahassee State FL Zip Code 32301-1720</p> <p>Name of Employer or Principal Place of Business Fl Education Assoc. Advoc-</p> <p>Occupation Education Association</p>	<p><b>Transaction ID:</b>C4963769</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>
<p><b>D.</b> Full Name (Last, First, Middle Initial) Florida PCIAA CCE</p> <p>Mailing Address 2600 S River Rd</p> <p>City Des Plaines State IL Zip Code 60018-3203</p> <p>Name of Employer or Principal Place of Business Florida PCIAA</p> <p>Occupation Insurance Industry CCE</p>	<p><b>Transaction ID:</b>C4924152</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>40000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. Fonvielle, Lewis, Foote &amp; Messer</b>			<b>Transaction ID:</b> C4960874 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
Mailing Address 3375 Capital Cir NE Bldg A			Amount of Each Receipt this Period 10000.00	
City Tallahassee	State FL	Zip Code 32308-3778	Aggregate Year-to-Date 10000.00	
Name of Employer or Principal Place of Business Fonvielle, Lewis, Foote & Messer			<b>Account:</b> Monetary	
Occupation Law Firm				
Full Name (Last, First, Middle Initial) <b>B. Genentech</b>			<b>Transaction ID:</b> C4960838 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
Mailing Address PO Box 9030			Amount of Each Receipt this Period 10000.00	
City San Francisco	State CA	Zip Code 94083-9030	Aggregate Year-to-Date 10000.00	
Name of Employer or Principal Place of Business Genentech			<b>Account:</b> Monetary	
Occupation BioTech Company				
Full Name (Last, First, Middle Initial) <b>C. GMRI, INC.</b>			<b>Transaction ID:</b> C4924690 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0	
Mailing Address PO Box 695012			Amount of Each Receipt this Period 10000.00	
City Orlando	State FL	Zip Code 32869-5012	Aggregate Year-to-Date 10000.00	
Name of Employer or Principal Place of Business GMRI, INC.			<b>Account:</b> Monetary	
Occupation Restaurant				
Full Name (Last, First, Middle Initial) <b>D. Gold Star Holdings, LLC</b>			<b>Transaction ID:</b> C4954398 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0	
Mailing Address 1877 S Federal Hwy			Amount of Each Receipt this Period 10000.00	
City Boca Raton	State FL	Zip Code 33432-7467	Aggregate Year-to-Date 10000.00	
Name of Employer or Principal Place of Business Gold Star Holdings, LLC			<b>Account:</b> Monetary	
Occupation Investors				
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			40000.00	
<b>TOTAL</b> This Period (last page this line number only) .....				

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. Greenspoon Marder, PA</b>			<b>Transaction ID:</b> C4961175 <b>Date of Receipt</b> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0		
Mailing Address 100 W Cypress Creek Rd Ste 700			Amount of Each Receipt this Period 10000.00		
City Fort Lauderdale	State FL	Zip Code 33309-2195	Aggregate Year-to-Date 10000.00		
Name of Employer or Principal Place of Business Greenspoon Marder, PA			<b>Account:</b> Monetary		
Occupation Law Firm					
Full Name (Last, First, Middle Initial) <b>B. Halstatt Partnership</b>			<b>Transaction ID:</b> C4954400 <b>Date of Receipt</b> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0		
Mailing Address 2600 Golden Gate Pkwy			Amount of Each Receipt this Period 10000.00		
City Naples	State FL	Zip Code 34105-3227	Aggregate Year-to-Date 10000.00		
Name of Employer or Principal Place of Business Halstatt Partnership			<b>Account:</b> Monetary		
Occupation Developers					
Full Name (Last, First, Middle Initial) <b>C. Harrell &amp; Harrell, P.A.</b>			<b>Transaction ID:</b> C4981917 <b>Date of Receipt</b> M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0		
Mailing Address 4735 Sunbeam Rd			Amount of Each Receipt this Period 10000.00		
City Jacksonville	State FL	Zip Code 32257-6107	Aggregate Year-to-Date 10000.00		
Name of Employer or Principal Place of Business Harrell & Harrell, P.A.			<b>Account:</b> Monetary		
Occupation Law Firm					
Full Name (Last, First, Middle Initial) <b>D. HBR Properties, LLC</b>			<b>Transaction ID:</b> C4954396 <b>Date of Receipt</b> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0		
Mailing Address 1877 S Federal Hwy Ste 310			Amount of Each Receipt this Period 10000.00		
City Boca Raton	State FL	Zip Code 33432-7411	Aggregate Year-to-Date 10000.00		
Name of Employer or Principal Place of Business HBR Properties, LLC			<b>Account:</b> Monetary		
Occupation Real Estate					
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			<b>40000.00</b>		
<b>TOTAL</b> This Period (last page this line number only) .....					

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. International Association of Fire Fighters - FIREP</b>			<b>Transaction ID:</b> C4780147 Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 1 0
Mailing Address 1750 New York Ave NW			Amount of Each Receipt this Period 10000.00
City Washington State DC Zip Code 20006-5305			Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Firefighters Occupation PAC			<b>Account:</b> Monetary
Full Name (Last, First, Middle Initial) <b>B. IUPAT</b>			<b>Transaction ID:</b> C4978546 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
Mailing Address 7234 Parkway Dr			Amount of Each Receipt this Period 10000.00
City Hanover State MD Zip Code 21076-1307			Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business IUPAT Occupation Manufacturing Company			<b>Account:</b> Monetary
Full Name (Last, First, Middle Initial) <b>C. Leesfield, Leighton &amp; Partners, P.A.</b>			<b>Transaction ID:</b> C4978599 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
Mailing Address 2350 S Dixie Hwy			Amount of Each Receipt this Period 10000.00
City Miami State FL Zip Code 33133-2314			Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Occupation Law Firm			<b>Account:</b> Monetary
Full Name (Last, First, Middle Initial) <b>D. MARK - PAC</b>			<b>Transaction ID:</b> C4976924 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
Mailing Address 215 S Monroe St Ste 701			Amount of Each Receipt this Period 10000.00
City Tallahassee State FL Zip Code 32301-1858			Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business MARK - PAC Occupation Business			<b>Account:</b> Monetary
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			40000.00
<b>TOTAL</b> This Period (last page this line number only) .....			

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Full Name (Last, First, Middle Initial) <b>A. Robin Hood Holdings, LLC</b>			<b>Transaction ID:</b> C4954397 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
Mailing Address 1877 S Federal Hwy Ste 310			Amount of Each Receipt this Period 10000.00
City Boca Raton	State FL	Zip Code 33432-7411	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Robin Hood Holdings, LLC			<b>Account:</b> Monetary
Occupation Financial Services			
Full Name (Last, First, Middle Initial) <b>B. Searcy Denney Scarola Barnhart</b>			<b>Transaction ID:</b> C4978329 Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Mailing Address 2139 Palm Beach Lakes Blvd			Amount of Each Receipt this Period 10000.00
City West Palm Beach	State FL	Zip Code 33409-6601	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Searcy, Denney, Scarola, Barnhart			<b>Account:</b> Monetary
Occupation Law Firm			
Full Name (Last, First, Middle Initial) <b>C. Swope, Rodante P.A.</b>			<b>Transaction ID:</b> C4981004 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
Mailing Address 1234 E 5th Ave			Amount of Each Receipt this Period 10000.00
City Tampa	State FL	Zip Code 33605-4904	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business Swope, Rodante P.A.			<b>Account:</b> Monetary
Occupation Law Firm			
Full Name (Last, First, Middle Initial) <b>D. TECO Energy Inc.</b>			<b>Transaction ID:</b> C4954404 Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
Mailing Address 702 N Franklin St			Amount of Each Receipt this Period 10000.00
City Tampa	State FL	Zip Code 33602-4429	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business TECO Energy Inc.			<b>Account:</b> Monetary
Occupation Utility Company			
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			40000.00
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)  1a  2

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p><b>A.</b> Full Name (Last, First, Middle Initial) Terrell Hogan Ellis Yegelwel, P.A.</p> <p>Mailing Address 233 E Bay St FL 8</p> <p>City Jacksonville State FL Zip Code 32202-3459</p> <p>Name of Employer or Principal Place of Business Terrell Hogan</p> <p>Occupation Attorney</p>	<p><b>Transaction ID:</b>C4960871</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Health Care Professionals CCE</p> <p>Mailing Address 1525 NW 167th St Ste 150</p> <p>City Miami State FL Zip Code 33169-5143</p> <p>Name of Employer or Principal Place of Business The Health Care Professio- nals CCE</p> <p>Occupation healthcare committee</p>	<p><b>Transaction ID:</b>C4978469</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Wackenhut Corporation</p> <p>Mailing Address 4200 Wackenhut Dr</p> <p>City West Palm Beach State FL Zip Code 33410-4242</p> <p>Name of Employer or Principal Place of Business The Wackenhut Corporation</p> <p>Occupation Security Services</p>	<p><b>Transaction ID:</b>C4961378</p> <p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account:</b> Monetary</p>

**SUBTOTAL** of Receipts This Page (optional) .....

30000.00

**TOTAL** This Period (last page this line number only) .....

345000.00

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 234 / 234
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input checked="" type="checkbox"/> 4d	

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) / Full Organization Name Florida Democratic Party Non Federal Account	Transaction ID: D427896																					
	Date of Disbursement																					
Mailing Address 214 S Bronough St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		2	8		2	0	1	0													
City State Zip Code Tallahassee FL 32301-1705	Amount of Each Disbursement this Period																					
Purpose of Disbursement Transfer to federal account	<table border="1"> <tr> <td colspan="10">355000.00</td> </tr> </table>		355000.00																			
355000.00																						
	Account: Monetary																					

SUBTOTAL of Disbursements This Page (optional) .....	▶	355000.00
TOTAL This Period (last page this line number only) .....	▶	355000.00