

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
Friends of Carl Domino

ADDRESS (number and street) 136 Terrapin Trail
 Check if different than previously reported. (ACC) Jupiter FL 33458-7737

2. **FEC IDENTIFICATION NUMBER** ▼ C C00547281 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
FL 18

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
08 / 07 / 2014 through 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gregory Wilder

Signature of Treasurer Gregory Wilder *[Electronically Filed]* Date M M / D D / Y Y Y Y
10 / 15 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Carl Domino

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	44155.00	235503.63
(b) Total Contribution Refunds (from Line 20(d))	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	43155.00	234503.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	508537.63	934913.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	508537.63	934913.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	84589.82	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	785000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Carl Domino

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35175.00	196750.00
(ii) Unitemized.....	8980.00	33227.00
(iii) TOTAL of contributions from individuals ▶	44155.00	229977.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	4526.63
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	44155.00	235503.63
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	360000.00	785000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	360000.00	785000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	404155.00	1020503.63

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	508537.63	934913.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1000.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	509537.63	935913.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	189972.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	404155.00
25. SUBTOTAL (add Line 23 and Line 24).....	594127.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	509537.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	84589.82

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N
Transaction ID :

Frank Callander contributed \$1,000 during the 48-hour notice period prior to the Primary election. The contribution was received by campaign staff, but the information was not provided to the campaign treasurer until after the Primary election. Therefore, the contribution was refunded.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 6 OF 66
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
L. Rob Werner

Mailing Address 41984 Mapleleaf Dr
P.O. Box 3906

City State Zip Code
Big Bear Lake CA 92315

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

Name of Employer Occupation Information Requested
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : AD05B1154656042D9B19

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Sidney F Dinerstein

Mailing Address 15 Saint George Pl

City State Zip Code
Palm Beach Gardens FL 33418-4024

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

Name of Employer Occupation Information Requested
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : A0F877745DDAC45AF828

Amount of Each Receipt this Period
1000.00

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

Mailing Address 516 S Beach Road

City State Zip Code
Hobe Sound FL 33455-2801

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

Name of Employer Occupation Information Requested
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : AB603DF3ACC6E4A7BA1E

Amount of Each Receipt this Period
300.00

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

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

1525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Gabe Hoffman

Mailing Address 12210 Banyan Road

City North Palm Beach State FL Zip Code 33408-2515

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

Name of Employer Accipiter Capital Management Occupation Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : AEB75CCA19C0140AFAF0

Amount of Each Receipt this Period
2600.00

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

Mailing Address 241 Bradley Place

City Palm Beach State FL Zip Code 33480-3738

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

Name of Employer Developmental Services LLC Occupation Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2014

Transaction ID : A645F109381C04B72BC9

Amount of Each Receipt this Period
1000.00

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

Mailing Address 108 Turtle Creek Drive

City Tequesta State FL Zip Code 33469-1547

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

Name of Employer Juno Capital Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : AD519541B141C4B8CBB5

Amount of Each Receipt this Period
500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

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

Mailing Address 150 Bradley Place

City State Zip Code
Palm Beach FL 33480-3804

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2014

Transaction ID : A7616C00EEF694BB58BF

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 213445

City State Zip Code
Royal Palm Beach FL 33421-3445

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

Name of Employer Occupation
Self Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2014

Transaction ID : A4BDF2F5F3CC4B3B84F

Amount of Each Receipt this Period
250.00

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

Mailing Address 2370 NE Ocean Blvd
A306

City State Zip Code
Stuart FL 34996-2949

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : A0BBCEB4BD512435FAD0

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
John R Stripling

Mailing Address 7606 Pine Tree Lane

City West Palm Beach State FL Zip Code 33406-7832

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A2E4013350E4D4B6294C

Amount of Each Receipt this Period
100.00

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

Mailing Address 11000 Prosperity Farms Road Suite 202

City Palm Beach Gardens State FL Zip Code 33410-3462

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 31 / 2014

Transaction ID : A7F5938B0196A4EDDBD6

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Eric M Javitz

Mailing Address 150 Bradley Place

City Palm Beach State FL Zip Code 33480-3804

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A807D54107C5A4C92B83

Amount of Each Receipt this Period
500.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Richard A Hocker

Mailing Address 6421 SE Harbor Cir

City State Zip Code
Stuart FL 34996-1960

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

Name of Employer Occupation
Penn Capital Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : A0280C50A3BCC415BA7C

Amount of Each Receipt this Period
1000.00

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

Mailing Address 18880 Point Drive

City State Zip Code
Tequesta FL 33469-2026

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

Name of Employer Occupation
Point Consults Quality Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 31 / 2014

Transaction ID : A4A3FD2648AFD42DC9FB

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Harold A Ofstie

Mailing Address 919 Orchid Point Way

City State Zip Code
Vero Beach FL 32963-9518

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : AD8CAA0641D114210A7E

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

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

Mailing Address 12931 Inshore Drive

City State Zip Code
West Palm Beach FL 33410-2005

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : AAFBFE7826DCE46219B1

Amount of Each Receipt this Period
200.00

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

Mailing Address 7150 Winding Bay Lane

City State Zip Code
West Palm Beach FL 33412-3039

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

Name of Employer Occupation
None Retired Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : A69322D4920314C45988

Amount of Each Receipt this Period
100.00

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

Mailing Address 330 South Ocean Blvd.
Apt. 3B

City State Zip Code
Palm Beach FL 33480

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : AB64D00F3E22A48A390A

Amount of Each Receipt this Period
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Jimmy Magee

Mailing Address 75 Seaweed Road

City Southampton State NY Zip Code 11968-1526

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 31 / 2014

Transaction ID : A9F65730E46D14A5A9B3

Amount of Each Receipt this Period
100.00

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

Mailing Address 4521 Pga Blvd #108

City Palm Beach Gardens State FL Zip Code 33418-3997

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : AD053DFCEB6434B75BF0

Amount of Each Receipt this Period
250.00

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

Mailing Address 1039 Breakers West Way

City West Palm Beach State FL Zip Code 33411-1849

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : A6B64A4F48DC3404F8CE

Amount of Each Receipt this Period
1000.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 13 OF 66
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Scott Schroeder

Mailing Address 11000 Prosperity Farms Road
Suite 202

City State Zip Code
Palm Beach Gardens FL 33410-3462

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 31 / 2014

Transaction ID : A493FCFC322074A2EBB8

Amount of Each Receipt this Period
25.00

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

Mailing Address 136 Echo Drive

City State Zip Code
Jupiter FL 33458-7716

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : A2D2F279D80CE4A47800

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Clark A Johnson

Mailing Address 12130 Surrey Lane

City State Zip Code
North Palm Beach FL 33408-2935

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : A29718A32B25444A5B7D

Amount of Each Receipt this Period
500.00

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

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

725.00

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

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

FOR LINE NUMBER: PAGE 14 OF 66
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
william Hait

Mailing Address 3631 Loire Lane

City State Zip Code
Palm Beach Gardens FL 33410

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

Name of Employer Occupation
Retired pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : A573CC1E6CD1941EFBFE

Amount of Each Receipt this Period
500.00

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

Mailing Address P.O. Box 21440

City State Zip Code
Little Rock AR 72221-1440

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

Name of Employer Occupation
Mountaire, Inc. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : A33EF0138D1314E35803

Amount of Each Receipt this Period
2600.00

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

Mailing Address 6108 95th Street Circle E

City State Zip Code
Bradenton FL 34202-9614

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

Name of Employer Occupation
MGA Insurance Agenct Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A5F9F5AE281334390A80

Amount of Each Receipt this Period
100.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Jonathan Schofield

Mailing Address 128 Intracoastal Circle

City Tequesta	State FL	Zip Code 33469-2709
------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : A55CB0AC051DA4D33851

Amount of Each Receipt this Period
50.00

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

Mailing Address 4089 SE Old Saint Lucie Boulevard

City Stuart	State FL	Zip Code 34996-5122
----------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : A71FE8C2648B34FE3B69

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Stephen B Rockoff

Mailing Address 314 Spyglass Way

City Jupiter	State FL	Zip Code 33477-4049
-----------------	-------------	------------------------

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

Name of Employer Stephen B. Rockoff, P.A.	Occupation Realtor
--	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : A111376BE88124A36841

Amount of Each Receipt this Period
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
jacques paul-hus

Mailing Address 9656 Dovetree Isle Dr

City State Zip Code
Boynton Beach FL 33473-4910

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

Name of Employer Occupation
self employed self employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : AC61A211410B14FDA9F1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Pamela G Persons

Mailing Address 175 Ridge Road

City State Zip Code
Jupiter FL 33477-9659

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

Name of Employer Occupation
Hospice of PB County RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 21 / 2014

Transaction ID : AB80AFC126B0C41C89C3

Amount of Each Receipt this Period
100.00

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

Mailing Address 5654 High Flyer Rd E

City State Zip Code
Palm Beach Gardens FL 33418-7713

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

Name of Employer Occupation
Gunster Yokley Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : AB6D8A614019340768A4

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Henry A Bradford

Mailing Address 12112 SE Prestwick Ter

City Tequesta State FL Zip Code 33469-1773

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A18C55BF8B3A14626AE5

Amount of Each Receipt this Period
 500.00

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

Mailing Address 11116 Arroyo Drive

City Rockville State MD Zip Code 20852

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : AABBD C249AD164493A03

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1039 Breakers West Way

City West Palm Beach State FL Zip Code 33411-1849

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : AD59F7FF2010E41BD819

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Gilman Gunn

Mailing Address 35 Edmunds Road

City Wellesley State MA Zip Code 02481-2907

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : AB0C9A4C09EBB4560871

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James P Mitchell

Mailing Address 166 Ennis Lane

City Jupiter State FL Zip Code 33458-6503

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : A1E7EDD47BD1648608BA

Amount of Each Receipt this Period
200.00

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

Mailing Address 128 Intracoastal Circle

City Tequesta State FL Zip Code 33469-2709

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : AE6B83BEBCC2F444B9E0

Amount of Each Receipt this Period
50.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Frederick Green

Mailing Address 10805 SE Deck Court

City State Zip Code
Hobe Sound FL 33455-3235

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

Name of Employer Occupation
Gardens A1A Texaco Marketer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : A211A65BDF7834F409D9

Amount of Each Receipt this Period
200.00

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

Mailing Address 12210 Banyan Road

City State Zip Code
North Palm Beach FL 33408-2515

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

Name of Employer Occupation
Accipiter Capital Management Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : AF40E0AD5AF0F4530879

Amount of Each Receipt this Period
2600.00

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

Mailing Address 6368 SE Federal Hwy

City State Zip Code
Stuart FL 34997-8363

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

Name of Employer Occupation
R.C. Lindsey Plumbing Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A289EBD0A9E924B7BA9B

Amount of Each Receipt this Period
250.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Michael L Adams

Mailing Address **PO Box 12909**

City **Fort Pierce** State **FL** Zip Code **34979-2909**

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

Name of Employer **Adams Ranch** Occupation **Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : A9FE49897AAFC4100B4B

Amount of Each Receipt this Period
500.00

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

Mailing Address **19456 Pinetree Dr**

City **Jupiter** State **FL** Zip Code **33469-2036**

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

Name of Employer **Lewis, Longman, & Walker** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : AD9059725D14549D6BDB

Amount of Each Receipt this Period
250.00

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

Mailing Address **310 Spyglass Way**

City **Jupiter** State **FL** Zip Code **33477-4049**

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

Name of Employer **Roberts-Marting** Occupation **Secretary**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2014

Transaction ID : A91FF37864D484A2E8DC

Amount of Each Receipt this Period
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Virginia E Jeckering

Mailing Address **7720 Mayfield Rd**

City **Gates Mills** State **OH** Zip Code **44040-8601**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : A700257E6E9714ADB8EA

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Linda T Gore

Mailing Address **610 Xanadu Place**

City **Jupiter** State **FL** Zip Code **33477-6449**

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

Name of Employer **Berkshire Hathaway** Occupation **Real Estate Broker**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 11 / 2014

Transaction ID : AA950A92819D742AE9C4

Amount of Each Receipt this Period
250.00

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

Mailing Address **Box 8020**

City **Garden city** State **NY** Zip Code **11530**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : AF1185F86FCA2469EBA6

Amount of Each Receipt this Period
1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Jimmy Magee

Mailing Address 75 Seaweed Road

City Southampton State NY Zip Code 11968-1526

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

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

Transaction ID : A09259936A5C9461C9BF

Amount of Each Receipt this Period
100.00

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

Mailing Address 12557 Equine Lane

City Wellington State FL Zip Code 33414-3507

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

Name of Employer SouthCap Properties Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : ADE53E89F42D3425DA93

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Gayle B Harrell

Mailing Address 1885 NW Eagle Pt

City Stuart State FL Zip Code 34994-9408

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

Name of Employer Florida House of Representatives Occupation Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : AFB5F18FB95A4F4EA4B

Amount of Each Receipt this Period
500.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 23 OF 66
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

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

Mailing Address **PO Box 3594**

City **Jupiter** State **FL** Zip Code **33469-1009**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A197415061C004225971

Amount of Each Receipt this Period
250.00

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

Mailing Address **716 SW Squire Johns LN**

City **Palm City** State **FL** Zip Code **34990**

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

Name of Employer **Nu Way Concrete Forms Inc** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A59C9124F6CC846EE8D0

Amount of Each Receipt this Period
250.00

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

Mailing Address **19934 Scrimshaw Way**

City **Tequesta** State **FL** Zip Code **33469-2252**

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

Name of Employer **Loxahatchee Club Realty** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : A6A17702DC11D486CBC2

Amount of Each Receipt this Period
150.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Thomas E Jeckering

Mailing Address **7720 Mayfield Rd**

City **Gates Mills** State **OH** Zip Code **44040-8601**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : AAE960A513F684DE9B57

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
L. Donald Jaffin

Mailing Address **PO Box 7071**

City **Jupiter** State **FL** Zip Code **33468-7071**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : A9361E1A4AAE64276BCC

Amount of Each Receipt this Period
100.00

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

Mailing Address **12530 Seminole Beach Road**

City **North Palm Beach** State **FL** Zip Code **33408**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A38C9E6B4247B4580A58

Amount of Each Receipt this Period
2600.00

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 66
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Steven Templeton

Mailing Address 71 Whispering Oaks Trail

City State Zip Code
West Palm Beach FL 33411-4613

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

Name of Employer Occupation
Templeton & Co. CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : AC4383611343D4342AB0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
William R Magrogan

Mailing Address PO Box 3594

City State Zip Code
Jupiter FL 33469-1009

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : A7EA64FEC9FB34BBAA4A

Amount of Each Receipt this Period
250.00

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

Mailing Address 33 SE 5th Street

City State Zip Code
Boca Raton FL 33432-6030

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : AA969D5C13C7D434A948

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 66
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
George Isaacs

Mailing Address P.O. Box 10280

City Honolulu State HI Zip Code 96816-0280

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

Name of Employer George F Isaacs Foundation Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A814A92E329424BA6B2C

Amount of Each Receipt this Period
 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

35175.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 66
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) Carl J Domino		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 136 Terrapin Trail		Transaction ID : AA1DAAA8E16249A9B05
City Jupiter	State FL	Zip Code 33458-7737
FEC ID number of contributing federal political committee. C H4FL18068	Amount of Each Receipt this Period 100000.00	
Name of Employer Carl Domino, Inc.	Occupation Investment Management	Candidate Loan
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 589526.63	

Full Name (Last, First, Middle Initial) Carl J Domino		Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address 136 Terrapin Trail		Transaction ID : AF4DDD97D70D74753BDE
City Jupiter	State FL	Zip Code 33458-7737
FEC ID number of contributing federal political committee. C H4FL18068	Amount of Each Receipt this Period 60000.00	
Name of Employer Carl Domino, Inc.	Occupation Investment Management	Loan
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 489526.63	

Full Name (Last, First, Middle Initial) Carl J Domino		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 136 Terrapin Trail		Transaction ID : A2B780CE1DB5E400E92E
City Jupiter	State FL	Zip Code 33458-7737
FEC ID number of contributing federal political committee. C H4FL18068	Amount of Each Receipt this Period 100000.00	
Name of Employer Carl Domino, Inc.	Occupation Investment Management	Candidate loan
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 789526.63	

SUBTOTAL of Receipts This Page (optional).....	260000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 66
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Full Name (Last, First, Middle Initial)
Carl J Domino

Mailing Address 136 Terrapin Trail

City State Zip Code
Jupiter FL 33458-7737

FEC ID number of contributing federal political committee. **C H4FL18068**

Name of Employer Occupation
Carl Domino, Inc. Investment Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
689526.63

Date of Receipt
 M M / D D / Y Y Y Y
09 / 17 / 2014

Transaction ID : A697E740F1A824528BE9

Amount of Each Receipt this Period
100000.00

Candidate Loan

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

100000.00

360000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Anna Cardenal		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 266 SW Bridgeport Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : B846366AD027745EF98C
City Port St Lucie	State FL	
Zip Code 34953-7111	Purpose of Disbursement Office assistance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Frank Cardenal		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 266 SW Bridgepoint Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : BC39792DB35A648B3BE1
City Port St. Lucie	State FL	
Zip Code 34953	Purpose of Disbursement Office assistance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tim Benson		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 851 NW Red Pine Way		Amount of Each Disbursement this Period 2089.47 Transaction ID : B7903CF01A96844BC808
City Jensen Beach	State FL	
Zip Code 34957-3494	Purpose of Disbursement Get out the vote	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3089.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Annette James		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 6009 NW Winfield Drive		Amount of Each Disbursement this Period 5651.18 Transaction ID : BD213ADC237724C03BE3
City Port St Lucie	State FL	
Zip Code 34986-3738	Purpose of Disbursement Field organizing	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Monica Wilson		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 19227 Caribbean Court		Amount of Each Disbursement this Period 5000.15 Transaction ID : B6875A8A644E6481C84D
City Jupiter	State FL	
Zip Code 33469-2073	Purpose of Disbursement Database management	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) c. Public Concepts LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 5730 Corporate Way		Amount of Each Disbursement this Period 23959.53 Transaction ID : BCFA411FAF07244638C1
City West Palm Beach	State FL	
Zip Code 33407-2046	Purpose of Disbursement Printing and direct mail services	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	34610.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00 Transaction ID : B804576B667E84E3EAFF
City Orange City	State FL	
Zip Code 32763-8314	Purpose of Disbursement wire fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Strategic Media Placement		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 50000.00 Transaction ID : BCB42B4C37B5E419C991
City Delaware	State OH	
Zip Code 43015-7010	Purpose of Disbursement Television advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00 Transaction ID : BB1C050354F8D41CFAD6
City Orange City	State FL	
Zip Code 32763-8314	Purpose of Disbursement Wire fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	50030.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Strategic Media Placement		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 72656.50 Transaction ID : B87876354CECB41C68A5
City Delaware State OH Zip Code 43015-7010	Purpose of Disbursement Television advertising Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00 Transaction ID : B1A95F326F49F402F9DC
City Orange City State FL Zip Code 32763-8314	Purpose of Disbursement Wire fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Strategy Group For Media		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 7800.00 Transaction ID : BB9490EC75C9D4EC398D
City Delaware State OH Zip Code 43015-7010	Purpose of Disbursement Radio advertising Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	80471.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Public Concepts LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 5730 Corporate Way		Amount of Each Disbursement this Period 16312.62 Transaction ID : B6BF9D329130F4BFCBCF
City West Palm Beach	State FL Zip Code 33407-2046	
Purpose of Disbursement Printing and postage for fundraising letter	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Facebook.Com		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 501.53 Transaction ID : B4F4FDD28E65845689D4
City Menlo Park	State CA Zip Code 94025-1452	
Purpose of Disbursement Social media advertising	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Aristotle Publishing		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00 Transaction ID : B045762CF48ED48049B3
City Washington	State DC Zip Code 20003-1164	
Purpose of Disbursement Software Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17514.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. Budget Printing

Full Name (Last, First, Middle Initial)
Mailing Address 4152 Blue Heron Boulevard W Suite 108

City Riviera Beach State FL Zip Code 33404-4858

Purpose of Disbursement Invitation printing Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 25 / 2014

Amount of Each Disbursement this Period 2295.58

Transaction ID : BAC773148D9134F918C6

B. Gregory B Wilder

Full Name (Last, First, Middle Initial)
Mailing Address 2140 Three M Trail

City Deland State FL Zip Code 32720-1615

Purpose of Disbursement Express Delivery Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 28 / 2014

Amount of Each Disbursement this Period 84.23

Transaction ID : B03DA4FB125F34531936

c. Nationbuilder

Full Name (Last, First, Middle Initial)
Mailing Address 448 S Hill Street Suite 200

City Los Angeles State CA Zip Code 90013-1155

Purpose of Disbursement Social media database management Category/Type 007

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 28 / 2014

Amount of Each Disbursement this Period 399.00

Transaction ID : B312B6448BA2444DB939

SUBTOTAL of Disbursements This Page (optional) 2778.81

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00 Transaction ID : B6D7C650913354D3190D
City Orange City	State FL	
Zip Code 32763-8314	Purpose of Disbursement Bank wire fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Public Concepts LLC		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 5730 Corporate Way		Amount of Each Disbursement this Period 25425.68 Transaction ID : B3BE71D82C7C842EBA3D
City West Palm Beach	State FL	
Zip Code 33407-2046	Purpose of Disbursement Printing and postage for solicitation letter	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Strategy Group For Media		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 7400.00 Transaction ID : B0BD8580EB6284A5C905
City Delaware	State OH	
Zip Code 43015-7010	Purpose of Disbursement Television and radio advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	32840.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

A. eDonation.com

Full Name (Last, First, Middle Initial)
Mailing Address 117 N Saint Asaph Street

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement
On-line fundraising fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
08 / 31 / 2014

Amount of Each Disbursement this Period
784.60

Transaction ID : **BB0F41A8D8D324449952**

Category/Type: 003

B. eDonation.com

Full Name (Last, First, Middle Initial)
Mailing Address 117 N Saint Asaph Street

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement
Web hosting fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
08 / 31 / 2014

Amount of Each Disbursement this Period
25.00

Transaction ID : **B07B24FAD96864EA0A0F**

Category/Type: 003

C. eDonation.com

Full Name (Last, First, Middle Initial)
Mailing Address 117 N Saint Asaph Street

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
08 / 31 / 2014

Amount of Each Disbursement this Period
242.39

Transaction ID : **B2A12ED7C518D4D5AB1E**

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional)..... 1051.99

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Annie M Delgado		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1255 NW 105th Terrace		Amount of Each Disbursement this Period 2500.00 Transaction ID : BAEF5F4E9E7D2488AB19
City Ocala	State FL Zip Code 34482-9527	
Purpose of Disbursement Fundraising coordinator	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Russell Gibson		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 237		Amount of Each Disbursement this Period 940.78 Transaction ID : B0D066887236B423DB6A
City Stuart	State FL Zip Code 34995-0237	
Purpose of Disbursement Field organizing	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Annette James		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 6009 NW Winfield Drive		Amount of Each Disbursement this Period 5766.38 Transaction ID : BEC6E250BBFC74CA5B16
City Port St Lucie	State FL Zip Code 34986-3738	
Purpose of Disbursement Field organizing	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9207.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 66			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Nathan Gatto		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 6479 NW Regal Cir NW Regal Circle		Amount of Each Disbursement this Period 500.00 Transaction ID : B32526DD507AB43ADA04
City Port Saint Lucie	State FL Zip Code 34983-5359	
Purpose of Disbursement Get out the vote efforts	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Steven Maher		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 148 SW Exora Ter		Amount of Each Disbursement this Period 500.00 Transaction ID : B94E8479FE5E84E29B3F
City Port Saint Lucie	State FL Zip Code 34953-5904	
Purpose of Disbursement Get out the vote efforts	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Richard Gore		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 16648 90th Trl N		Amount of Each Disbursement this Period 500.00 Transaction ID : BF13D34B925734DE1A53
City Jupiter	State FL Zip Code 33478-4801	
Purpose of Disbursement Get out the vote efforts	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 66			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Timothy Benson			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 851 NW Red Pine Way			Amount of Each Disbursement this Period 2235.88 Transaction ID : BB6F1B5D3950D472DADA
City Jensen Beach	State FL	Zip Code 34957-3494	
Purpose of Disbursement Office administration		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 955 Saxon Boulevard			Amount of Each Disbursement this Period 15.00 Transaction ID : BCC398C32F7214888888
City Orange City	State FL	Zip Code 32763-8314	
Purpose of Disbursement Wire Fee		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Facebook.Com			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1601 Willow Road			Amount of Each Disbursement this Period 646.68 Transaction ID : BF0D4A16B4F2645BE879
City Menlo Park	State CA	Zip Code 94025-1452	
Purpose of Disbursement Social Media Advertising		Candidate Name	Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2897.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Dickinson and McDonald, P.A		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 201 S Florida Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : BF33A9AB52C0E49B4BAB
City Deland	State FL	
Zip Code 32720-5405	Purpose of Disbursement Accounting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Harold Hesselrode		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1255 NW 105th Terrace		Amount of Each Disbursement this Period 266.77 Transaction ID : BF7242784FD7F4F91B37
City Ocala	State FL	
Zip Code 34482-9527	Purpose of Disbursement Food and linens for event	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Gregory B Wilder		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 2140 Three M Trail		Amount of Each Disbursement this Period 19.60 Transaction ID : BF0D8E4917CAE4AD8B70
City Deland	State FL	
Zip Code 32720-1615	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1286.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Bogart Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : BDA857EDC26B147B99A9
City Alexandria	State VA	
Zip Code 22314-4724	Purpose of Disbursement Fundraising coordinator	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 10435 Ironwood Road		Amount of Each Disbursement this Period 166.83 Transaction ID : B9572D2F9E5484ECD98A
City Palm Beach Gardens	State FL	
Zip Code 33410-4224	Purpose of Disbursement Cable service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Maplewood Investors, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 501 Maplewood Drive		Amount of Each Disbursement this Period 700.00 Transaction ID : B7477212749DC4FE8813
City Jupiter	State FL	
Zip Code 33458-5577	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2866.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Monica Wilson		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 19227 Caribbean Court		Amount of Each Disbursement this Period 3669.34 Transaction ID : B7FE278FB34B04F37B88
City Jupiter	State FL	
Zip Code 33469-2073	Purpose of Disbursement Database management	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maplewood Investors, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 501 Maplewood Drive		Amount of Each Disbursement this Period 64.74 Transaction ID : BD3CB85CBE1D94E478E4
City Jupiter	State FL	
Zip Code 33458-5577	Purpose of Disbursement Electricity charge	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sunoco		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 4109 Northlake Boulevard		Amount of Each Disbursement this Period 57.45 Transaction ID : B488C883D90584B7EBF1
City Palm Beach Gardens	State FL	
Zip Code 33410-6258	Purpose of Disbursement Gas for travel to district event	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3791.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Strategic Media Placement		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 75000.00
City Delaware State OH Zip Code 43015-7010	Purpose of Disbursement Radio and Television time purchase	Transaction ID : BA14F49DFD5F4ABC65
Candidate Name	Category/Type 004	
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00
City Orange City State FL Zip Code 32763-8314	Purpose of Disbursement Wire fee	Transaction ID : BEC09147014EC42D9859
Candidate Name	Category/Type 001	
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Strategic Media Placement		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 25000.00
City Delaware State OH Zip Code 43015-7010	Purpose of Disbursement Radio and Television time purchase	Transaction ID : BE247C6454684482B86C
Candidate Name	Category/Type 004	
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	100015.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Strategic Media Placement			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 7669 Stagers Loop			Amount of Each Disbursement this Period 50000.00	
City Delaware	State OH	Zip Code 43015-7010	Transaction ID : B6B31264A54EC42C49FF	
Purpose of Disbursement Media Purchase		004 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Annie M Delgado			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 1255 NW 105th Terrace			Amount of Each Disbursement this Period 1227.50	
City Ocala	State FL	Zip Code 34482-9527	Transaction ID : BB9661B5DAF4C4D048B1	
Purpose of Disbursement Fundraising coordinator		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BB&T			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 955 Saxon Boulevard			Amount of Each Disbursement this Period 15.00	
City Orange City	State FL	Zip Code 32763-8314	Transaction ID : BDB72FC71FB214BF2B31	
Purpose of Disbursement Wire Fee		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	51242.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Aristotle Publishing		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 700.00 Transaction ID : BC0EC20E67D824C26934
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 30.00 Transaction ID : B815DA363A3734FFCBBE
City Orange City State FL Zip Code 32763-8314	Purpose of Disbursement Bank service fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Strategic Media Placement		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 50000.00 Transaction ID : B305BCCD8E5A94092825
City Delaware State OH Zip Code 43015-7010	Purpose of Disbursement Media purchase 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	50730.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Bogart Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : BE2F94040DCE341BAB28
City Alexandria	State VA	
Zip Code 22314-4724	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00 Transaction ID : B27FE4AF179704FD9946
City Orange City	State FL	
Zip Code 32763-8314	Purpose of Disbursement Wire fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. David Zuniga		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 2554 La Lique Cir		Amount of Each Disbursement this Period 2000.00 Transaction ID : B8F65A88B8133427E9AB
City West Palm Beach	State FL	
Zip Code 33410-1415	Purpose of Disbursement Field Organizing - Get out the vote	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4015.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Public Concepts LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 5730 Corporate Way		Amount of Each Disbursement this Period 602.00 Transaction ID : BF9D08B8EC4CC4AD5BE2
City West Palm Beach	State FL	
Zip Code 33407-2046	Purpose of Disbursement Photography	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 117 North Asaph Street		Amount of Each Disbursement this Period 3064.95 Transaction ID : BC1EC10CFE4014337B7B
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement On-line fundraising	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Racetrack		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 500 Northpoint Parkway		Amount of Each Disbursement this Period 58.94 Transaction ID : B6DC969A9E31E4087866
City West Palm Beach	State FL	
Zip Code 33407-1903	Purpose of Disbursement Gas for travel to district event	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3725.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 66			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Nationbuilder		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 448 S Hill Street Suite 200		Amount of Each Disbursement this Period 399.00 Transaction ID : BF50355EBB185431984A
City Los Angeles	State CA Zip Code 90013-1155	
Purpose of Disbursement Voter database management	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Strategic Media Placement		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 50000.00 Transaction ID : B1C28EC1123F3463A906
City Delaware	State OH Zip Code 43015-7010	
Purpose of Disbursement Radio and television	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Facebook.Com		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 750.38 Transaction ID : B38022FE7345041DA8E5
City Menlo Park	State CA Zip Code 94025-1452	
Purpose of Disbursement Social media advertising	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51149.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 66			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement MM / DD / YYYY 09 / 29 / 2014
Mailing Address 955 Saxon Boulevard		Amount of Each Disbursement this Period 15.00 Transaction ID : B4B285F422BEE46F9B93
City Orange City	State FL	
Zip Code 32763-8314	Purpose of Disbursement Bank wire fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 09 / 29 / 2014
Mailing Address 9995 SE Federal Highway		Amount of Each Disbursement this Period 392.00 Transaction ID : B731458C627C340B5A54
City Hobe Sound	State FL	
Zip Code 33455-4829	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. eDonation.com		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 431.99 Transaction ID : BEB14DFA26A314A5D9D8
City Alexandria	State VA	
Zip Code 22314-3109	Purpose of Disbursement Credit card processing fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	838.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 66			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. eDonation.com		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 25.00 Transaction ID : B2FDDF8FFA46542B1AE1
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement Web Hosting Fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. eDonation.com		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 117 N Saint Asaph Street		Amount of Each Disbursement this Period 1877.58 Transaction ID : B230C2798BD5C41A68EC
City Alexandria State VA Zip Code 22314-3109	Purpose of Disbursement On-line fundraising fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Gregory B Wilder		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 2140 Three M Trail		Amount of Each Disbursement this Period 48.59 Transaction ID : BC6DDD1BC9BA64F878B1
City Deland State FL Zip Code 32720-1615	Purpose of Disbursement Express Delivery Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1951.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 66			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. The UPS Store		Date of Disbursement MM / DD / YYYY 09 / 25 / 2014
Mailing Address 1702 N Woodland Boulevard		Amount of Each Disbursement this Period 48.59
City Deland State FL Zip Code 32720-1837	Purpose of Disbursement Express Delivery	
Candidate Name	Category/Type 001	Transaction ID : B6631D52937074A2393E [MEMO ITEM]
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Annie M Delgado		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 1255 NW 105th Terrace		Amount of Each Disbursement this Period 536.41
City Ocala State FL Zip Code 34482-9527	Purpose of Disbursement Food and linens for event	
Candidate Name	Category/Type 007	Transaction ID : BC4E138BCBB5844C4931
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Spoto's Oyster Bar		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 131 SW Flagler Avenue		Amount of Each Disbursement this Period 338.41
City Stuart State FL Zip Code 34994-2139	Purpose of Disbursement Food for event	
Candidate Name	Category/Type 007	Transaction ID : B1A2C7D2FE8B34B74A4F [MEMO ITEM]
Office Sought: House Senate President	Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	536.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 66	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Gregory B Wilder		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 2140 Three M Trail		Amount of Each Disbursement this Period 69.93 Transaction ID : B8847D3C4722F459E869
City Deland State FL Zip Code 32720-1615	Purpose of Disbursement Express Delivery Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The UPS Store		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 1702 N Woodland Boulevard		Amount of Each Disbursement this Period 69.93 Transaction ID : B91B85898D80246569EF [MEMO ITEM]
City Deland State FL Zip Code 32720-1837	Purpose of Disbursement Express Delivery Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	69.93
TOTAL This Period (last page this line number only).....	508211.18

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 66			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Full Name (Last, First, Middle Initial) A. Frank Callander		Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 1039 Breakers West Way		Amount of Each Disbursement this Period 1000.00 Transaction ID : BDFFB3873FA984343B1D
City West Palm Beach	State FL Zip Code 33411-1849	
Purpose of Disbursement Refund: Refund of contribution	Category/Type 010	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : CE31803D0DF4A4475982

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

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred: M 10 / D 18 / Y 2013
Date Due: M 01 / D 01 / Y 1900
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 50000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **C25D42374E98D4564AFB**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Carl J Domino** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred M 12 / D 31 / Y 2013	Date Due M 01 / D 01 / Y 1900	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	▶	[] 50000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **CD682B4C5F30B4C6F957**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Carl J Domino** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: M 09 / D 17 / Y 2013
Date Due: M 01 / D 01 / Y 1900
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 50000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : CA1DAAA8E16249A9B05

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

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred: M 09 / D 12 / Y 2014
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 100000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : C795661985B814E8E8F1

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

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
25000.00 0.00 25000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 22 / Y 2013 M 01 / D 01 / Y 1900 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 25000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **CF4DDD97D70D74753BDE**

LOAN SOURCE Full Name (Last, First, Middle Initial) Carl J Domino	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 136 Terrapin Trail		

City	State	ZIP Code
Jupiter	FL	33458-7737

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
60000.00	0.00	60000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 08 / D 23 / Y 2014	M 01 / D 01 / Y 1900			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	60000.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : C2B780CE1DB5E400E92E

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

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred: M 09 / D 26 / Y 2014
 Date Due: M / D / Y None
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional).....	▶	100000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **C016BFEEFACE447599B3**

LOAN SOURCE Full Name (Last, First, Middle Initial) Carl J Domino	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 136 Terrapin Trail		

City	State	ZIP Code
Jupiter	FL	33458-7737

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 28 / Y 2014	M 01 / D 01 / Y 1900			0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	50000.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **C697E740F1A824528BE9**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Carl J Domino** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address 136 Terrapin Trail
 City State ZIP Code
 Jupiter FL 33458-7737

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS Date Incurred Date Due Interest Rate Secured:
 M M / D D / Y Y Y Y M M / D D / Y Y None 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 100000.00
TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **C3B05664908594755842**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Carl J Domino** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred M 03 / D 18 / Y 2014	Date Due M 01 / D 01 / Y 1900	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	▶	50000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **C20BA55040CB142D9B0D**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Carl J Domino** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred M 11 / D 20 / Y 2013	Date Due M 01 / D 01 / Y 1900	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	▶	50000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Carl Domino

Transaction ID : CC9B25446B56F460D8A6

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

Carl J Domino

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
50000.00 0.00 50000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 07 / Y 2014 M 01 / D 01 / Y 1900 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 50000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Friends of Carl Domino** Transaction ID : **C3CDF4669F62F461F989**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Carl J Domino** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
136 Terrapin Trail

City State ZIP Code
Jupiter FL 33458-7737

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred M 08 / D 20 / Y 2013	Date Due M 01 / D 01 / Y 1900	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	50000.00
TOTALS This Period (last page in this line only).....	785000.00

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