

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
ED MACDOUGALL CAMPAIGN

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))....	523.56	28648.56
(b) Total Contribution Refunds (from Line 20(d))	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	523.56	28448.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	94747.44	210952.86
(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)).....	94747.44	210952.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	28495.70	
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).....	211000.00	

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

ED MACDOUGALL CAMPAIGN

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).....	500.00	24350.00
(ii) Unitemized	23.56	4298.56
(iii) TOTAL of contributions from individuals	523.56	28648.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	523.56	28648.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	80000.00	211000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	80000.00	211000.00
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).....	80523.56	239648.56

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	94747.44	210952.86
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	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	200.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	94747.44	211152.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	42719.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	80523.56
25. SUBTOTAL (add Line 23 and Line 24).....	123243.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	94747.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28495.70

**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 5 OF 63
	<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	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

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

Mailing Address 8770 Sunset Dr. Ste. 531

City Miami State FL Zip Code 33173

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

Name of Employer Self-Employed Occupation Insurance

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
 05 / 21 / 2014

Transaction ID : SA11AI.4791

Amount of Each Receipt this Period
 Contribution 250.00

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

Mailing Address 5010 SW 111th Ave.

City Miami State FL Zip Code 33165

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

Name of Employer Coral Gables Police Department Occupation Police Officert

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
 06 / 30 / 2014

Transaction ID : SA11AI.4794

Amount of Each Receipt this Period
 Contribution 250.00

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).....

500.00

500.00

**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 6 OF 63
	<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	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

A. Full Name (Last, First, Middle Initial)
Edward P. MacDougall

Mailing Address 7955 SW 201 Terrace

City	State	Zip Code
Miami	FL	33189-2117

FEC ID number of contributing federal political committee. **C H4FL26012**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA13A.4798

Amount of Each Receipt this Period
20000.00

Loan from Candidate

B. Full Name (Last, First, Middle Initial)
Edward P. MacDougall

Mailing Address 7955 SW 201 Terrace

City	State	Zip Code
Miami	FL	33189-2117

FEC ID number of contributing federal political committee. **C H4FL26012**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
160000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : SA13A.4780

Amount of Each Receipt this Period
10000.00

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

Mailing Address 7955 SW 201 Terrace

City	State	Zip Code
Miami	FL	33189-2117

FEC ID number of contributing federal political committee. **C H4FL26012**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 09 / 2014

Transaction ID : SA13A.4781

Amount of Each Receipt this Period
50000.00

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

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

80000.00

80000.00

**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 7 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Best Choice Silk Screen & Embroidery		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 19100 SW 106 Avenue, #2		Amount of Each Disbursement this Period 1476.07 Transaction ID : SB17.4757
City Miami State FL Zip Code 33157	Purpose of Disbursement Campaign Shirts	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4667
City Cutler Bay State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.4672
City Cutler Bay State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	1631.07
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 8 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4637
City Cutler Bay	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4644
City Cutler Bay	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4650
City Cutler Bay	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	260.00
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 9 OF 63
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 76.50 Transaction ID : SB17.4652
City State Zip Code Cutler Bay FL 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 106.83 Transaction ID : SB17.4586
City State Zip Code Cutler Bay FL 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 11.83 Transaction ID : SB17.4595
City State Zip Code Cutler Bay FL 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	195.16
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 10 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 94.00 Transaction ID : SB17.4601
City Cutler Bay	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 29.67 Transaction ID : SB17.4608
City Cutler Bay	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Samantha Blyer		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 280.50 Transaction ID : SB17.4613
City Cutler Bay	State FL	
Purpose of Disbursement Canvassing		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	404.17
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 11 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Campaign Super Store, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 13899 Biscayne Blvd., Ste. 130		Amount of Each Disbursement this Period 5243.00 Transaction ID : SB17.4756
City North Miami Beach	State FL Zip Code 33181	
Purpose of Disbursement Campaign Signs	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Campaign Super Store, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 13899 Biscayne Blvd., Ste. 130		Amount of Each Disbursement this Period 422.65 Transaction ID : SB17.4754
City North Miami Beach	State FL Zip Code 33181	
Purpose of Disbursement Printing	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4658
City Miami	State FL Zip Code 33158	
Purpose of Disbursement Phone Banking	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	5785.65
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 12 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.4621
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.4623
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.4633
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	180.00
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 13 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4573
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4575
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 39.93 Transaction ID : SB17.4577
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	199.93
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 14 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Alexis Ceballos		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 13740 SW 82nd Avenue		Amount of Each Disbursement this Period 157.67 Transaction ID : SB17.4587
City Miami State FL Zip Code 33158	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 18055 Franjo Road		Amount of Each Disbursement this Period 13851.00 Transaction ID : SB17.4583
City Palmetto Road State FL Zip Code 33157	Purpose of Disbursement TV Ad	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 18055 Franjo Road		Amount of Each Disbursement this Period 9689.00 Transaction ID : SB17.4604
City Palmetto Road State FL Zip Code 33157	Purpose of Disbursement TV Commercial	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	23697.67
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 15 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 18055 Franjo Road		Amount of Each Disbursement this Period 573.75 Transaction ID : SB17.4616
City Palmetto Road	State FL Zip Code 33157	
Purpose of Disbursement TV AD	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 18055 Franjo Road		Amount of Each Disbursement this Period 1371.87 Transaction ID : SB17.4617
City Palmetto Road	State FL Zip Code 33157	
Purpose of Disbursement TV AD	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 110.00 Transaction ID : SB17.4657
City Miami	State FL Zip Code 33157	
Purpose of Disbursement Phone Banking	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	2055.62
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 16 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4660
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.4666
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4636
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	320.00
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 17 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4643
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4649
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 105.00 Transaction ID : SB17.4627
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	355.00
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 18 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 68.50 Transaction ID : SB17.4578
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 76.00 Transaction ID : SB17.4588
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 40.67 Transaction ID : SB17.4596
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	185.17
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 19 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 143.00 Transaction ID : SB17.4602
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 29.67 Transaction ID : SB17.4609
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Yazmin Cueller		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 9545 SW 182nd Street		Amount of Each Disbursement this Period 368.50 Transaction ID : SB17.4614
City Miami State FL Zip Code 33157	Purpose of Disbursement Canvassing	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	541.17
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 20 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4682
City Miami State FL Zip Code 33187	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4683
City Miami State FL Zip Code 33187	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) C. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 115.00 Transaction ID : SB17.4686
City Miami State FL Zip Code 33187	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	355.00
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 21 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4687
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 155.00 Transaction ID : SB17.4689
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4703
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	375.00
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 22 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 104.50 Transaction ID : SB17.4704
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4708
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4714
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	244.50
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 23 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 70.00
City Miami	State FL	
Zip Code 33187	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Michelle Damas		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 15259 SW 193 Street		Amount of Each Disbursement this Period 155.00
City Miami	State FL	
Zip Code 33187	Purpose of Disbursement Phone Bank	Category/ Type
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. Nicholas Espinoza		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 8502 SW 209 Lane		Amount of Each Disbursement this Period 209.00
City Cutler Bay	State FL	
Zip Code 33189	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	434.00
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 24 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Annie Fernandez		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 18400 Franjo Road		Amount of Each Disbursement this Period 1350.00 Transaction ID : SB17.4605
City Cutler Bay	State FL	
Zip Code 33157	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) B. Florida Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 500 South Bronough Street		Amount of Each Disbursement this Period 10440.00 Transaction ID : SB17.4764
City Tallahassee	State FL	
Zip Code 32399	Purpose of Disbursement Filing Fee	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) c. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4690
City Cutler Bay	State FL	
Zip Code 33189	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	11870.00
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 25 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4691
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4705
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 65.00 Transaction ID : SB17.4709
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	155.00
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 26 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4715
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4719
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Build Signs	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.4722
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	1150.00
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 27 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 155.00 Transaction ID : SB17.4727
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Adam Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 20300 SW 80 Avenue		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4729
City State Zip Code Cutler Bay FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Emily Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 7964 SW 199 Terr		Amount of Each Disbursement this Period 79.33 Transaction ID : SB17.4710
City State Zip Code Miami FL 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	294.33
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 28 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Emily Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 7964 SW 199 Terr		Amount of Each Disbursement this Period 86.50 Transaction ID : SB17.4713
City Miami State FL Zip Code 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Emily Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 7964 SW 199 Terr		Amount of Each Disbursement this Period 58.67 Transaction ID : SB17.4720
City Miami State FL Zip Code 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Emily Fullana		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 7964 SW 199 Terr		Amount of Each Disbursement this Period 40.83 Transaction ID : SB17.4728
City Miami State FL Zip Code 33189	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	186.00
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 29 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4661
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4669
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4624
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	320.00
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 30 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4635
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4641
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4576
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	380.00
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 31 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 114.17 Transaction ID : SB17.4579
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 116.33 Transaction ID : SB17.4589
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 94.00 Transaction ID : SB17.4600
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	324.50
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 32 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 29.17 Transaction ID : SB17.4572
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Adriana Garcia		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 368.50 Transaction ID : SB17.4611
City Miami State FL Zip Code 33157	Purpose of Disbursement Canvassing	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Andres Garcia		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 9450 SW 181 Street		Amount of Each Disbursement this Period 247.50 Transaction ID : SB17.4746
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	645.17
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 33 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 3396.00 Transaction ID : SB17.4664
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 1069.00 Transaction ID : SB17.4631
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 710.00 Transaction ID : SB17.4639
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional)	5175.00
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 34 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 3422.00 Transaction ID : SB17.4646
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 1780.00 Transaction ID : SB17.4585
City Cooper City	State FL	
Purpose of Disbursement Campaign Consultant		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 690.00 Transaction ID : SB17.4599
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	5892.00
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 35 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 1095.00 Transaction ID : SB17.4603
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 490.00 Transaction ID : SB17.4610
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 485.00 Transaction ID : SB17.4618
City Cooper City	State FL	
Purpose of Disbursement Campaign Consulting		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	2070.00
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 36 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Mr. Mark Goodrich		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 3480.00 Transaction ID : SB17.4620
City State Zip Code Cooper City FL 33330	Purpose of Disbursement Campaign Consulting	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Andrew Green		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 14452 SW 152 PL		Amount of Each Disbursement this Period 214.50 Transaction ID : SB17.4723
City State Zip Code Miami FL 33196	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Image Plus Graphics		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1440 NE 131 Street		Amount of Each Disbursement this Period 424.00 Transaction ID : SB17.4628
City State Zip Code North Miami FL 33161	Purpose of Disbursement Printing	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4118.50
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 37 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Image Plus Graphics		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1440 NE 131 Street		Amount of Each Disbursement this Period 1658.00 Transaction ID : SB17.4647
City North Miami State FL Zip Code 33161	Purpose of Disbursement Graphics printing	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Impact Sign Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 105 NE 3rd Road		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4765
City Homestead State FL Zip Code 33030	Purpose of Disbursement Printing	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Impact Sign Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 105 NE 3rd Road		Amount of Each Disbursement this Period 1738.75 Transaction ID : SB17.4775
City Homestead State FL Zip Code 33030	Purpose of Disbursement Campaign Signs	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	4396.75
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 63		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Luke Kosar		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.4656
City North Miami	State FL	
Zip Code 33261	Purpose of Disbursement Campaign Consulting	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) B. Luke Kosar		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4665
City North Miami	State FL	
Zip Code 33261	Purpose of Disbursement Campaign Consulting	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) C. Luke Kosar		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.4630
City North Miami	State FL	
Zip Code 33261	Purpose of Disbursement Campaign Consulting	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
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 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Luke Kosar		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1750.00 Transaction ID : SB17.4584
City North Miami	State FL	
Purpose of Disbursement Campaign Consultant		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Kristin Lazarus		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 618 Little Wekiva Rd.		Amount of Each Disbursement this Period 280.50 Transaction ID : SB17.4724
City Altamonte	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Lazaro Martinez		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 13057 SW 54th CT.		Amount of Each Disbursement this Period 71.50 Transaction ID : SB17.4712
City Miramar	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	2102.00
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 40 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. On Point Solutions		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1460 NW 107 Ave. Ste. P		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.4770
City Doral	State FL Zip Code 33172	
Purpose of Disbursement Republican Summit	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Republican Party of Miami-Dade		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 1460 NW 107 Avenue Ste. P		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4772
City Doral	State FL Zip Code 33172	
Purpose of Disbursement Republican Meeting	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.4638
City Miami	State FL Zip Code 33157	
Purpose of Disbursement Phone Bank	Category/Type	
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2830.00
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 41 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 70.00
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Transaction ID : SB17.4642
Office Sought: <input checked="" 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: FL District: 26	Category/Type	

Full Name (Last, First, Middle Initial) B. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 80.00
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Transaction ID : SB17.4648
Office Sought: <input checked="" 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: FL District: 26	Category/Type	

Full Name (Last, First, Middle Initial) c. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 115.00
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Transaction ID : SB17.4626
Office Sought: <input checked="" 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: FL District: 26	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	265.00
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 42 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 63.33 Transaction ID : SB17.4580
City Miami	State FL	
Zip Code 33157	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) B. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 93.67 Transaction ID : SB17.4590
City Miami	State FL	
Zip Code 33157	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) c. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 20.67 Transaction ID : SB17.4597
City Miami	State FL	
Zip Code 33157	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	177.67
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 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 75.67 Transaction ID : SB17.4606
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.4607
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Amber Roach		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 17453 SW 79th Place		Amount of Each Disbursement this Period 104.50 Transaction ID : SB17.4612
City Miami	State FL	
Purpose of Disbursement Canvassing		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	205.17
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 44 OF 63		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4662
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4670
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 115.00 Transaction ID : SB17.4673
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Banking	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	275.00
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 45 OF 63		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.4632
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.4645
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.4574
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/ Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	180.00
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 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 99.00 Transaction ID : SB17.4582
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 71.50 Transaction ID : SB17.4593
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 71.50 Transaction ID : SB17.4594
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	242.00
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 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Ashley Sanchez		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 17605 SW 90th Avenue		Amount of Each Disbursement this Period 313.50 Transaction ID : SB17.4615
City Miami	State FL	
Zip Code 33157	Purpose of Disbursement Canvassing	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) B. Scheckner & Hetenyi, PL		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 2525 Ponce De Leon Blvd.		Amount of Each Disbursement this Period 1143.75 Transaction ID : SB17.4771
City Coral Gables	State FL	
Zip Code 33134	Purpose of Disbursement Accounting	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) c. Rodrigo Solorzano		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 7029 SW 128th Ct		Amount of Each Disbursement this Period 280.50 Transaction ID : SB17.4725
City Miami	State FL	
Zip Code 33183	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	1737.75
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 63		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 160.00 Transaction ID : SB17.4659
City Miami	State FL	
Purpose of Disbursement Phone Banking		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.4668
City Miami	State FL	
Purpose of Disbursement Phone Banking		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 110.00 Transaction ID : SB17.4625
City Miami	State FL	
Purpose of Disbursement Phone Bank		Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN		
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	360.00
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 49 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4634
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.4640
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.4651
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	300.00
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 50 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 79.33 Transaction ID : SB17.4581
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) B. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 117.33 Transaction ID : SB17.4591
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

Full Name (Last, First, Middle Initial) c. Rachel Tallale		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 17201 SW 86th Avenue		Amount of Each Disbursement this Period 78.83 Transaction ID : SB17.4598
City Miami State FL Zip Code 33157	Purpose of Disbursement Phone Bank	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type
Office Sought: <input checked="" 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: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	275.49
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 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 9833 E. Hibiscus Street		Amount of Each Disbursement this Period 1666.00
City Miami State FL Zip Code 33257	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : SB17.4629
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. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 9833 E. Hibiscus Street		Amount of Each Disbursement this Period 408.00
City Miami State FL Zip Code 33257	Purpose of Disbursement Postage	
Candidate Name ED MACDOUGALL CAMPAIGN	Category/Type	Transaction ID : SB17.4619
Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) c. WebElect.net LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1256 Vinetree Dr.		Amount of Each Disbursement this Period 270.00
City Brandon State FL Zip Code 33510	Purpose of Disbursement Camapign Data	
Candidate Name ED MACDOUGALL CAMPAIGN	Category/Type	Transaction ID : SB17.4776
Office Sought: <input checked="" 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: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	2344.00
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 52 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

Full Name (Last, First, Middle Initial) A. WFOR-TV		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 8900 NW 18 Terrace		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4763
City Miami	State FL	
Zip Code 33172	Purpose of Disbursement TV Advertising	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) B. Will Williams		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 10930 SW 78th Ave.		Amount of Each Disbursement this Period 368.50 Transaction ID : SB17.4741
City Miami	State FL	
Zip Code 33156	Purpose of Disbursement Phone Bank	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

Full Name (Last, First, Middle Initial) C. WPLG		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 3401 West Hallandale Beach Blvd.		Amount of Each Disbursement this Period 1300.00 Transaction ID : SB17.4755
City Pembroke Park	State FL	
Zip Code 33023	Purpose of Disbursement TV Advertising	Category/ Type
Candidate Name ED MACDOUGALL CAMPAIGN	Office Sought: <input checked="" 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: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	2018.50
TOTAL This Period (last page this line number only).....	92508.94

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)

Transaction ID : SC/10.4339

ED MACDOUGALL CAMPAIGN

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

ED MACDOUGALL CAMPAIGN

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address

2655 LEJEUNE ROAD SUITE 323

City

State

ZIP Code

CORAL GABLES

FL

33134

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

TERMS

Date Incurred

M 01 / D 22 / Y 2013

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)..... ▶

500.00

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) **ED MACDOUGALL CAMPAIGN** Transaction ID : **SC/10.4340**

LOAN SOURCE Full Name (Last, First, Middle Initial) ED MACDOUGALL CAMPAIGN	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2655 LEJEUNE ROAD SUITE 323	

City	State	ZIP Code
CORAL GABLES	FL	33134

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 / 22 / 2013	None	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).....	500.00
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)

Transaction ID : SC/10.4138

ED MACDOUGALL CAMPAIGN

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

[PERSONAL FUNDS]

Election: 2014

Edward P. MacDougall

Primary

General

Other (specify) ▼

Mailing Address

7955 SW 201 Terrace

City

State

ZIP Code

Miami

FL

33189-2117

Original Amount of Loan

34000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

34000.00

TERMS

Date Incurred

M 03 / D 25 / Y 2013

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)..... ▶

34000.00

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)

Transaction ID : SC/10.4328

ED MACDOUGALL CAMPAIGN

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

[PERSONAL FUNDS]

Election: 2014

Edward P. MacDougall

Primary

General

Other (specify) ▼

Mailing Address

7955 SW 201 Terrace

City

State

ZIP Code

Miami

FL

33189-2117

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 10 /

Y 2013 Y

M M /

D D /

Y None Y

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).....

6000.00

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)

Transaction ID : SC/10.4417

ED MACDOUGALL CAMPAIGN

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

[PERSONAL FUNDS]

Election: 2014

Edward P. MacDougall

Primary
 General
 Other (specify) ▼

Mailing Address
7955 SW 201 Terrace

City State ZIP Code
Miami FL 33189-2117

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 11 / D 03 / Y 2013 M M / D D / 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)..... ▶ 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

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)

Transaction ID : SC/10.4513

ED MACDOUGALL CAMPAIGN

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

Edward P. MacDougall

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
7955 SW 201 Terrace

City State ZIP Code
Miami FL 33189-2117

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

TERMS

Date Incurred: M 02 / 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).....	▶	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

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)

Transaction ID : SC/10.4512

ED MACDOUGALL CAMPAIGN

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

Edward P. MacDougall

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
7955 SW 201 Terrace

City State ZIP Code
Miami FL 33189-2117

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000.00 0.00 20000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 12 / Y 2014 M M / D D / 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)..... ▶ 20000.00
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) **ED MACDOUGALL CAMPAIGN** Transaction ID : **SC/10.4514**

LOAN SOURCE Full Name (Last, First, Middle Initial) Edward P. MacDougall	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7955 SW 201 Terrace	

City	State	ZIP Code
Miami	FL	33189-2117

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2014	M / D / Y None	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).....	▶	20000.00
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) **ED MACDOUGALL CAMPAIGN** Transaction ID : **SC/10.4798**

LOAN SOURCE Full Name (Last, First, Middle Initial) Edward P. MacDougall	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7955 SW 201 Terrace	

City	State	ZIP Code
Miami	FL	33189-2117

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 19 / 2014	None	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).....	▶	20000.00
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)

Transaction ID : SC/10.4780

ED MACDOUGALL CAMPAIGN

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

Edward P. MacDougall

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
7955 SW 201 Terrace

City State ZIP Code
Miami FL 33189-2117

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 03 / 2014 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)..... ▶ 10000.00
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) **ED MACDOUGALL CAMPAIGN** Transaction ID : **SC/10.4781**

LOAN SOURCE Full Name (Last, First, Middle Initial) Edward P. MacDougall	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7955 SW 201 Terrace	

City	State	ZIP Code
Miami	FL	33189-2117

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:
06 / 09 / 2014	None	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).....	211000.00

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