

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))....	13400.00	19800.00
(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)).....	13400.00	19600.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	24076.36	34882.36
(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)).....	24076.36	34882.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	25717.64	
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).....	41000.00	

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).....	10750.00	16750.00
(ii) Unitemized	2650.00	3050.00
(iii) TOTAL of contributions from individuals	13400.00	19800.00
(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))..	13400.00	19800.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	6000.00	41000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	6000.00	41000.00
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).....	19400.00	60800.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24076.36	34882.36
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) ▶	24076.36	35082.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	30394.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19400.00
25. SUBTOTAL (add Line 23 and Line 24).....	49794.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24076.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25717.64

**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 22
	<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)
Burt Bloom

Mailing Address 5965 Chapman Field Drive

City State Zip Code
Pinecrest FL 33156

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

Name of Employer Occupation
Bloom, Gettis & Habib, P.A., CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2013

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period
500.00

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

Mailing Address 7930 SW 155 Street

City State Zip Code
Palmetto Bay FL 33157

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2013

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
250.00
Campaign Contribution

C. Full Name (Last, First, Middle Initial)
Yolanda B. Buchmann

Mailing Address 7745 SW 142nd Street

City State Zip Code
Palmetto Bay FL 33158-1514

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 08 / 2013

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period
500.00
Contribution

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

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

1250.00

**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 22
	<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)
Mr. Richard C Cannon

Mailing Address 8760 SW 150th Terrace

City Palmetto Bay State FL Zip Code 33176-8052

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2013

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Kenneth E. Cooke

Mailing Address 1011 N. Venetian Drive

City Miami State FL Zip Code 33139-1016

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

Name of Employer Smithco Ice, LLC Occupation Operator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2013

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph M Corradino

Mailing Address 10225 SW 58 Court

City Pinecrest State FL Zip Code 33156

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

Name of Employer The Corradino Group Occupation Urban Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2013

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period
 1000.00
 Lano Planner

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<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)
Mr. Thomas Michael David

Mailing Address 13725 SW 73 Court

City Palmetto Bay State FL Zip Code 33158-1211

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

Name of Employer Furst lttleman David & Joseph Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 07 / 2013

Transaction ID : SA11AI.4237

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Ron Derrick

Mailing Address 18400 SW 97th Ave.

City Cutler Bay State FL Zip Code 33157-7023

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

Name of Employer Choiccone Mortgage Corp. Occupation Mortgage Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 06 / 2013

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
 250.00

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

Mailing Address 18001 Old Cutler Road, Ste. 421

City Palmetto Bay State FL Zip Code 33157

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

Name of Employer Sheckner & Hetenyi, PI Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 08 / 2013

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period
 500.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 22
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ED MACDOUGALL CAMPAIGN

A. Full Name (Last, First, Middle Initial)
Mr. Arthur Nanni Jr.

Mailing Address 18843 SW 92nd Ave.

City State Zip Code
Cutler Bay FL 33157

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2013

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms Julianne Reynolds

Mailing Address 10395 SW 58th Ct.

City State Zip Code
Pinecrest FL 33156

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

Name of Employer Occupation
Morris & Reynolds Insurance Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2013

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
500.00

Campaign Donation

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

Mailing Address 18001 Old Cutler Road, Ste. 421

City State Zip Code
Palmetto Bay FL 33157

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

Name of Employer Occupation
Scheckner & Hetenyi, PL Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2013

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<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

Full Name (Last, First, Middle Initial) A. Maria Schwabe		Date of Receipt MM / DD / YYYY 05 / 08 / 2013
Mailing Address 17052 SW 91st Ave		Transaction ID : SA11AI.4161
City Palmetto Bay	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Re/Max Advance Realty	Occupation Realtor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Sarah Stone		Date of Receipt MM / DD / YYYY 04 / 25 / 2013
Mailing Address 1926 Parnell Ave.		Transaction ID : SA11AI.4254
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation General Campaign Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Mr. Christopher Taylor		Date of Receipt MM / DD / YYYY 06 / 06 / 2013
Mailing Address 920 Holcumb Bridge Road		Transaction ID : SA11AI.4317
City Roswell	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Taylor Lee & Associates	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<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)
Mr. John Turner

Mailing Address 16101 SW 156th Ave.

City Miami State FL Zip Code 33187-5227

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 02 / 2013

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Ms Angelica Young

Mailing Address 5901 SW 74th Street

City Miami State FL Zip Code 33143

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

Name of Employer A. Young and Associates Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 08 / 2013

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period
 1000.00

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

Amount of Each Receipt this Period

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

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

1250.00

10750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
	<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 Miami State FL Zip Code 33189-2117

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
40000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2013

Transaction ID : SA13A.4328

Amount of Each Receipt this Period
6000.00

Loan from Candidate

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

6000.00

6000.00

**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 12 OF 22	
	<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. Cynthia L. Dicke		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 7904 SW 199th Terrace		Amount of Each Disbursement this Period 473.62 Transaction ID : SB17.4334
City State Zip Code Cutler Bay FL 33189-2130	Purpose of Disbursement Reimbursement for Kick Off Party	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type 007
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <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 04 / 19 / 2013
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4266
City State Zip Code Cooper City FL 33330	Purpose of Disbursement General Campaign Consulting	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type 001
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 / 14 / 2013
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4290
City State Zip Code Cooper City FL 33330	Purpose of Disbursement General Campaign Consulting	
Candidate Name ED MACDOUGALL CAMPAIGN		Category/Type 001
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).....	6473.62
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4334

Original Vendor: Publix Super Markets Inc.20425 Old Cutler Road Cutler Bay, FL 33189 Date of Purchase: 5/8/13
Purpose: Food and Drinks for Kickoff Party Amount: \$473.62

Form/Schedule:

Transaction ID:

**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 22			
	<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 / 10 / 2013
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4304
City Cooper City	State FL	
Purpose of Disbursement General Campaign Consulting	Category/ Type 001	
Candidate Name ED MACDOUGALL CAMPAIGN	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 / 10 / 2013
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4307
City Cooper City	State FL	
Purpose of Disbursement Internet- 2 Tablets	Category/ Type 001	
Candidate Name ED MACDOUGALL CAMPAIGN	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 / 10 / 2013
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 1045.00 Transaction ID : SB17.4336
City Cooper City	State FL	
Purpose of Disbursement Reimbursement for Printing	Category/ Type 006	
Candidate Name ED MACDOUGALL CAMPAIGN	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	4145.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.4307

Original Vendor: Verizon Wireless 1450 NW 87th Ave.Ste. 101 Doral, FL 33172 Date of Purchase: 6/6/13 Purpose:
Internet for Tablets Amount: \$100

Form/Schedule: SB17

Transaction ID: SB17.4336

Original Vendor: Next Day Flyers 18711 S. Broadwick St.Compton, CA 90220 Date of Purchase: 6/8/13 Purpose:
Campaign Brochures Amount: \$1,045

**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 22			
	<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 MM / DD / YYYY 06 / 18 / 2013
Mailing Address 5722 S. Flamingo Road #522		Amount of Each Disbursement this Period 217.27 Transaction ID : SB17.4308
City Cooper City	State FL	
Zip Code 33330	Purpose of Disbursement T-Shirts	Category/ Type 001
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 MM / DD / YYYY 05 / 06 / 2013
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4286
City North Miami	State FL	
Zip Code 33261	Purpose of Disbursement General Campaign Consulting	Category/ Type 001
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 MM / DD / YYYY 06 / 01 / 2013
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4300
City North Miami	State FL	
Zip Code 33261	Purpose of Disbursement General Campaign Consulting	Category/ Type 001
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).....	2172.27
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 22	
	<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 MM / DD / YYYY 06 / 24 / 2013
Mailing Address PO Box 610373		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4309
City North Miami	State FL	
Zip Code 33261	Purpose of Disbursement General Campaign Consulting	Category/ Type 001
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. Peterson Design		Date of Disbursement MM / DD / YYYY 05 / 02 / 2013
Mailing Address 200 Collins Ave. Ste. 11		Amount of Each Disbursement this Period 530.00 Transaction ID : SB17.4271
City Miami Beach	State FL	
Zip Code 33139	Purpose of Disbursement Web Design	Category/ Type 001
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. Robert Brown and Associates		Date of Disbursement MM / DD / YYYY 05 / 01 / 2013
Mailing Address 15335 Old Cutler Road		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.4269
City Palmetto Bay	State FL	
Zip Code 33157	Purpose of Disbursement General Campaign Consulting	Category/ Type 001
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).....	7030.00
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 22	
	<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. Robert Brown and Associates		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013
Mailing Address 15335 Old Cutler Road		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4291
City Palmetto Bay State FL Zip Code 33157	Purpose of Disbursement General Campaign Consulting Category/Type 001	
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. James Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 18001 Old Cutler Road		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.4293
City Palmetto Bay State FL Zip Code 33157	Purpose of Disbursement General Campaign Consulting Category/Type 001	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	23320.89

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **ED MACDOUGALL CAMPAIGN** Transaction ID : **SC/10.4339**

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/10.4340

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 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:
M 01 / D 22 / 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)..... ▶ 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/10.4138**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Edward P. MacDougall Primary
 Mailing Address 7955 SW 201 Terrace General
 Other (specify) ▼

City State ZIP Code
 Miami FL 33189-2117

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
34000.00	0.00	34000.00

TERMS Date Incurred Date Due Interest Rate Secured:
 M 03 / D 25 / 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).....	▶	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

NAME OF COMMITTEE (In Full) **ED MACDOUGALL CAMPAIGN** Transaction ID : **SC/10.4328**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
Edward P. MacDougall Primary
 Mailing Address 7955 SW 201 Terrace General
 Other (specify) ▼

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
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TERMS

Date Incurred M 05 / D 10 / Y 2013	Date Due M / D / Y None	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	▶	[] 41000.00

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