

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 FRIENDS OF BILL FERREE

ADDRESS (number and street) 34503 PARKVIEW AVE EUSTIS FL 32736

2. FEC IDENTIFICATION NUMBER C C00556159 3. IS THIS REPORT NEW (N) OR AMENDED (A) FL 10

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

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

Type or Print Name of Treasurer WILLIAM M FERREE

Signature of Treasurer WILLIAM M FERREE [Electronically Filed] Date 04 / 15 / 2014

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

Office Use Only table with 7 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF BILL FERREE

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))....	33280.00	33280.00
(b) Total Contribution Refunds (from Line 20(d))	7000.00	7000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	26280.00	26280.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10268.82	10268.82
(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)).....	10268.82	10268.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	16011.18	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF BILL FERREE

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).....	21550.00	21550.00
(ii) Unitemized.....	4725.00	4725.00
(iii) TOTAL of contributions from individuals ▶	26275.00	26275.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	7005.00	7005.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	33280.00	33280.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	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)..... ▶	33280.00	33280.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10268.82	10268.82
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	7000.00	7000.00
(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)).....	7000.00	7000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17268.82	17268.82

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	33280.00
25. SUBTOTAL (add Line 23 and Line 24).....	33280.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17268.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	16011.18

**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 19	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
FRIENDS OF BILL FERREE

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

Mailing Address 2461 E Crooked Lake Club Blvd

City Eustis State FL Zip Code 32726

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

Name of Employer Self Occupation Automotive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period
 500.00

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

Mailing Address Third Ave Street 2

City Mount Dora State FL Zip Code 32757

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 2 Pumpkin Cir

City Exeter State NH Zip Code 03833

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

Name of Employer Delta Air Lines Occupation Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
 500.00

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

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

3500.00

**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 19
	<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)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Konstantinos Atsalis

Mailing Address 2 Pumpkin Cir

City Exeter State NH Zip Code 03833

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

Name of Employer Delta Air Lines Occupation Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4318

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 1300

City Eustis State FL Zip Code 32727

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

Name of Employer Florida Food Products Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

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

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
950.00

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

Mailing Address 707 Poinsetta Dr

City Eustis State FL Zip Code 32726

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
400.00

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

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

1600.00

**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 19
	<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)
FRIENDS OF BILL FERREE

Full Name (Last, First, Middle Initial) A. Al Chiodi		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address PO Box 1758		Transaction ID : SA11Al.4149
City Mount Dora	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Retired	
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. Mike Donatelli		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 65 E Monroe St Unit 4515		Transaction ID : SA11Al.4316
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Delta Airlines	Occupation Pilot	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Andrew Ferree		Date of Receipt M M / D D / Y Y Y Y 02 / 02 / 2014
Mailing Address 83 N Union St		Transaction ID : SA11Al.4159
City Arlington	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Self	Occupation Med Student	
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).....	3250.00
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 8 OF 19
	<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)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Betty Ferree

Mailing Address 83 N Union St

City: Arlington State: MA Zip Code: 02474

FEC ID number of contributing federal political committee: C

Name of Employer: N/A Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 02 / 27 / 2014

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period: 2000.00

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

Mailing Address 16693 New Hope Dr

City: Elk Creek State: MO Zip Code: 65464

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 01 / 22 / 2014

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period: 1000.00

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

Mailing Address PO Box 456

City: Mount Dora State: FL Zip Code: 32756

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 01 / 28 / 2014

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period: 250.00

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

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

3250.00

**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 19
	<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)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Nancy Hurlburt

Mailing Address 35624 Cypress Ct

City Leesburg State FL Zip Code 34788

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
 250.00

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

Mailing Address 18251 US 441

City Mount Dora State FL Zip Code 32757

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

Name of Employer First Green Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.4204

Amount of Each Receipt this Period
 2000.00

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

Mailing Address 2617 E Moonlight Ln

City Eustis State FL Zip Code 32726

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.4206

Amount of Each Receipt this Period
 250.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<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)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Russell Littlefield

Mailing Address 2617 E Moonlight Ln

City Eustis State FL Zip Code 32726

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4319

Amount of Each Receipt this Period
100.00

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

Mailing Address PO Box 507

City Princeton State NJ Zip Code 08542

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 12 / 2014

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period
1000.00

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

Mailing Address 624 E 3rd Ave

City Mount Dora State FL Zip Code 32757

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

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 16 / 2014

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period
300.00

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

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

1400.00

**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 19
	<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)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Larry Pierce

Mailing Address **PO Box 1138**

City **Mount Dora** State **FL** Zip Code **32756**

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

Name of Employer **Pierce Realty** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 19 / 2014

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period
250.00

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

Mailing Address **1727 E Crooked Lake Dr**

City **Eustis** State **FL** Zip Code **32726**

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

Name of Employer **Atticus, Inc** Occupation **Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period
250.00

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

Mailing Address **1895 Irma Rd**

City **Eustis** State **FL** Zip Code **32726**

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

Name of Employer **Self** Occupation **Serial Entrepreneur**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period
1000.00

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 12 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF BILL FERREE

Full Name (Last, First, Middle Initial) A. Anna Schroth		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 2149 Avenue C		Transaction ID : SA11AI.4245	
City Eustis	State FL	Zip Code 32726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Derek Schroth	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Anna Schroth		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 2149 Avenue C		Transaction ID : SA11AI.4247	
City Eustis	State FL	Zip Code 32726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Derek Schroth	Occupation Homemaker		
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) C. Wayne Smith		Date of Receipt M M / D D / Y Y Y Y 02 / 16 / 2014	
Mailing Address 303 S Exeter St		Transaction ID : SA11AI.4252	
City Eustis	State FL	Zip Code 32726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Lake County Schools	Occupation Teacher		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
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 13 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Karol Soltan

Mailing Address 11121 Rokeby Ave

City Kensington State MD Zip Code 20895

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

Name of Employer University of MD Occupation Associate Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.4254

Amount of Each Receipt this Period
 250.00

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

Mailing Address 11121 Rokeby Ave

City Kensington State MD Zip Code 20895

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

Name of Employer GW University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period
 250.00

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

Mailing Address 40904 Emerald Island

City Leesburg State FL Zip Code 34788

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

Name of Employer Self Occupation N/a

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4260

Amount of Each Receipt this Period
 300.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19
	<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)
FRIENDS OF BILL FERREE

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

Mailing Address 3311 Site to See Ave

City Eustis State FL Zip Code 32726

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

Name of Employer Self Occupation Design Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4268

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
George Warren Jr.

Mailing Address 2 E Magnolia Ave

City Eustis State FL Zip Code 32726

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

Name of Employer Bay Pharmacy Occupation Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.4272

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
George Warren Jr.

Mailing Address 2 E Magnolia Ave

City Eustis State FL Zip Code 32726

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

Name of Employer Bay Pharmacy Occupation Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period
 250.00

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: PAGE 15 OF 19
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
Tom Watson

Mailing Address 2939 Windham Rd

City State Zip Code
Eustis FL 32726

FEC ID number of contributing federal political committee.

Name of Employer Occupation
City of Mount Dora Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11Al.4276

Amount of Each Receipt this Period

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

Mailing Address 15480 Wisteria Ln

City State Zip Code
Spring Lake MI 49456

FEC ID number of contributing federal political committee.

Name of Employer Occupation
N/A Info Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11Al.4305

Amount of Each Receipt this Period

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

Mailing Address PO Box 407

City State Zip Code
Umatilla FL 32784

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FOCC Board of Directors Umatilla President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11Al.4280

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 19
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF BILL FERREE

A. Full Name (Last, First, Middle Initial)
WILLIAM M FERREE

Mailing Address 34503 PARKVIEW AVE

City State Zip Code
EUSTIS FL 32736

FEC ID number of contributing federal political committee. **C H4FL10107**

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 19 / 2014

Transaction ID : SA11D.4163

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
WILLIAM M FERREE

Mailing Address 34503 PARKVIEW AVE

City State Zip Code
EUSTIS FL 32736

FEC ID number of contributing federal political committee. **C H4FL10107**

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7005.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : SA11D.4121

Amount of Each Receipt this Period
7000.00

Errant Transfer

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).....

7005.00

7005.00

**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 17 OF 19			
	<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)
FRIENDS OF BILL FERREE

Full Name (Last, First, Middle Initial) A. Bulldog Finance Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 1250 Connecticut Ave NW Ste 200		Amount of Each Disbursement this Period 3378.00 Transaction ID : SB17.4116
City Washington State DC Zip Code 20036	Purpose of Disbursement Consultant Fee 001 Category/Type	
Candidate Name FRIENDS OF BILL FERREE	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: 10		

Full Name (Last, First, Middle Initial) B. Impact Politics		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 16740 Waters Edge Drive		Amount of Each Disbursement this Period 1000.50 Transaction ID : SB17.4123
City Weston State FL Zip Code 33326	Purpose of Disbursement Consultant Fee 001 Category/Type	
Candidate Name FRIENDS OF BILL FERREE	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: 10		

Full Name (Last, First, Middle Initial) c. Impact Politics		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 16740 Waters Edge Drive		Amount of Each Disbursement this Period 3213.00 Transaction ID : SB17.4117
City Weston State FL Zip Code 33326	Purpose of Disbursement Consultant Fee 001 Category/Type	
Candidate Name FRIENDS OF BILL FERREE	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: 10		

SUBTOTAL of Disbursements This Page (optional).....	7591.50
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 18 OF 19			
	<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)
FRIENDS OF BILL FERREE

Full Name (Last, First, Middle Initial)
A. Impact Politics

Mailing Address 16740 Waters Edge Drive

City Weston State FL Zip Code 33326

Purpose of Disbursement Consultant Fee

Candidate Name **FRIENDS OF BILL FERREE**

Office Sought: House Senate President
State: FL District: 10

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 03 / 10 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4119

Category/Type: 001

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

Mailing Address 317 N Orange Ave

City Orlando State FL Zip Code 32801

Purpose of Disbursement Bus Cards

Candidate Name **FRIENDS OF BILL FERREE**

Office Sought: House Senate President
State: FL District: 10

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 02 / 18 / 2014

Amount of Each Disbursement this Period: 200.01

Transaction ID : SB17.4112

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Sir Speedy

Mailing Address 317 N Orange Ave

City Orlando State FL Zip Code 32801

Purpose of Disbursement Postcards

Candidate Name **FRIENDS OF BILL FERREE**

Office Sought: House Senate President
State: FL District: 10

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 03 / 18 / 2014

Amount of Each Disbursement this Period: 148.75

Transaction ID : SB17.4113

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional)..... 2348.75

TOTAL This Period (last page this line number only)..... 9940.26

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF BILL FERREE

Full Name (Last, First, Middle Initial) A. WILLIAM M FERREE		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 34503 PARKVIEW AVE		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB20A.4122
City EUSTIS State FL Zip Code 32736	Purpose of Disbursement Transfer Refund 008 Category/Type	
Candidate Name FRIENDS OF BILL FERREE	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: 10		

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

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)	7000.00
TOTAL This Period (last page this line number only)	7000.00