10/22/2008 16:50

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

			All Addition 200	u			Office Use Only		
1.	NAME OF COMMITTEE (in		MAILING LABEL OR PRINT	Example over the	e:If typing, type e lines				
F	riends of Connie	Mack							
Ш			1 1 1 1 1		1 1 1 1		1 1 1 1		
AD	DRESS (number a	nd street) P.O. E	3ox 519						
	Check if different than previous reported. (AC	sly Manla	S				<u> </u>	34106	
2.	FEC IDENTIFICA	TION NUMBER	▼ CIT	TY 🛦		ST	ATE.	ZIP CODE A	
	C00391243	3	3. IS TH REPO		NEW (N)	or 🗌	AMENDEI (A)		L14
4.		ports: Quarterly Report (Q1	(b) 12-Da	Pri	ction Report for mary (12P) envention (12C	X	General (120 Special (128		off (12R)
		Quarterly Report (Q2)		ion on	11	0 4	2008	in the State of	FL
	January	31 Year-End Report	(YE) (c) 30-Da		ection Report	for the:	Runoff (30R)	Spec	ial (30S)
	Termina	ation Report (TER)	Elect	ion on				in the State of	
5.	Covering Period	10	2008	3	through	10	1 5	2008	
	ertify that I have exa	mined this Report and	to the best of my knoraig Engle	owledge and	belief it is true	e, correct and	d complete.		
Sig	nature of Treasurer		d by Craig Engle		ct the person s	Date			0 0 8 7g.
FE5	Office Use Only							FEC FORM 3 (Revised 02/2003)	

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Friends of Connie Mack ° D 0 1 10 2008 10 15 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 19189.00 1241994.71 (other than loans) (from Line 11(e))..... (b) Total Contribution Refunds 1135.00 1335.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 18054.00 1240659.71 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 98130.75 823688.77 (from Line 17)..... (b) Total Offsets to Operating 0.00 4207.48 Expenditures (from Line 14)..... (c) Net Operating Expenditures 819481.29 98130.75 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 675737.26 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

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) Page 3 Write or Type Committee Name Friends of Connie Mack ° D 2008 10 15 2008 From: 10 0 1 Report Covering the Period: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 10260.00 871307.79 (i) Itemized (use Schedule A)..... 629.00 75591.17 (ii) Unitemized..... (iii) TOTAL of contributions 10889.00 946898.96 from individuals..... 0.00 98.00 (b) Political Party Committees..... (c) Other Political Committees 8300.00 294997.75 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 19189.00 1241994.71 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 3892.94 14136.82 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 4207.48 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 0.00 1.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 23081.94 1260340.01

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date 98130.75 823688.77 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 15168.00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other 500.00 700.00 Than Political Committees..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 635.00 635.00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS 1135.00 1335.00 (add Lines 20(a), (b), and (c))..... 0.00 4100.00 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 99265.75 844291.77 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 751921.07 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 23081.94 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... 775003.01 25. SUBTOTAL (add Line 23 and Line 24)..... 99265.75 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 675737.26 (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5/3/ (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Friends of Connie Mack	e name and add	ness of any political committee to	y solicit continuations from such continuece.
Full Name (Last, First, Middle Initial)			D. (D.)
Ann Alexander Mailing Address 2644 Atoka Road			Date of Receipt
			10 02 2008
City Marshall	State VA	Zip Code	Transaction ID: 81022.C19549
FEC ID number of contributing federal political committee.	C	20115-3531	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	1	Receipt
Name of Employer Self Employed		anagement	Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify) ▼	Election C	ycle-to-Date ▼ 1400.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Marion Ashley			Date of Receipt
Mailing Address 1335 Rimrock Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 81022.C19519
Perris	CA	92570-6224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		205.00
Name of Employer Riverside Court	Occupation	5th District	Receipt Limit Increased Due to Opponent's
Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		205.00]
Full Name (Last, First, Middle Initial) Robert Assaf	1		Date of Receipt
Mailing Address 15860 Sawpit Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 81022.C19536
<u>Jacksonville</u>	FL	32226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00 Receipt
Name of Employer Liberty Ambulance Service	Occupation c.e.o	1	Limit Increased Due to Opponent's
Receipt For: 2008		ycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		750.00	1
SUBTOTAL of Receipts This Page (optional) .			1505.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 37 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Connie Mack	Statements may ne name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Margit Chiriaco Rusche			Date of Receipt
Mailing Address 62450 Chiriaco Rd			M M / D D / Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City Indio	State CA	Zip Code 92201-8202	Transaction ID: 81022.C19518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		205.00
Name of Employer Self Employed Receipt For: 2008 Primary X General Other (specify) ▼	Occupation self empl		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Thomas Dickinson Mailing Address 2229 McClellan Pkwy	/		Date of Receipt 1 0 0 5 2 0 0 8
City	State FL	Zip Code	Transaction ID: 81022.C19551
Sarasota FEC ID number of contributing federal political committee.	C	34239-3712	Amount of Each Receipt this Period 500.00
Name of Employer retired	Occupation retired	n	Receipt Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 1700.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Susan H. Earl			Date of Receipt
Mailing Address 945 Wedge Drive			10 03 7 9 9 9
City Naples	State FL	Zip Code 34103	Transaction ID: 81022.C19553 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer retired	Occupation retired		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Sycle-to-Date ▼ 300.00	Spending (2 0.5.0. 441a(1)/441a-1)
			805.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 37 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14				
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.				
Friends of Connie Mack						
Full Name (Last, First, Middle Initial) Norma Lee Fisher		Date of Receipt				
Mailing Address 324 Palm Dr Apt 1	Mailing Address 324 Palm Dr Apt 1					
City Naples	State Zip Code FL 34112-4957	Transaction ID: 81022.C19533				
FEC ID number of contributing federal political committee.	C 34112-4337	Amount of Each Receipt this Period				
Name of Employer retired	Occupation retired	Receipt Limit Increased Due to Opponent's				
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 269.00	Spending (2 U.S.C. 441a(i)/441a-1)				
Full Name (Last, First, Middle Initial) Melissa Fouladi		Date of Receipt				
Mailing Address 2016 Hillyer PI NW		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Washington	State Zip Code DC 20009	Transaction ID: 81022.C19541 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer Stoladi Property Group	Occupation vice president	Receipt Limit Increased Due to Opponent's				
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	Spending (2 U.S.C. 441a(i)/441a-1)				
Full Name (Last, First, Middle Initial) Robert Furek		Date of Receipt				
Mailing Address 1370 Cutler Ct.		10 14 2008				
City	State Zip Code	Transaction ID: 81022.C19520				
Marco Island FEC ID number of contributing federal political committee.	FL 34145	Amount of Each Receipt this Period 250.00				
Name of Employer retired	Occupation retired	Receipt Limit Increased Due to Opponent's				
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)				
	<u> </u>	850.00				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	fo	lse separate schedule(s) or each category of the detailed Summary Page	FOR LINE NUMBER: PAGE 8/3/ (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not the name and address	be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Friends of Connie Mack	the hame and address	or any political committee to	SOIGH CONTINUED TO THE SOUTH CONTINUED.
Full Name (Last, First, Middle Initial) Lori Hamilton			Date of Receipt
Mailing Address 23 N Beach Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City		Zip Code	Transaction ID: 81022.C19563
Hobe Sound	<u>FL</u>	33455-2101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Information Requested	Occupation Information F	Poguostod	Memo Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General	Election Cycle-	<u> </u>	Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Macks Joint Fundraiser
Other (specify)		0.00	
Full Name (Last, First, Middle Initial) Darlene Jursinski			Date of Receipt
Mailing Address 20297 Leopard Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		Zip Code	Transaction ID: 81022.C19524
<u>Estero</u>	FL	33928-2026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Information Requested	Occupation Information F	Requested	Receipt Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-	<u> </u>	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼	0 0 0	250.00	
Full Name (Last, First, Middle Initial) Kevin Jursinski			Date of Receipt
Mailing Address 20297 Leopard Ln			10 14 2008
City		Zip Code	Transaction ID: 81022.C19525
Estero	FL	33928-2026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self Employed	Occupation attorney		Receipt Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-	-to-Date 🔻	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		600.00	
			500.00

	HEDULE A (FEC Form 3) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/3/ (check only one)
Any or fo	information copied from such Reports and Sor commercial purposes, other than using the	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
\ \	IAME OF COMMITTEE (In Full) Friends of Connie Mack	e name and day	dess of any political committee to	Solicit Contributions from Such Committees.
	full Name (Last, First, Middle Initial)			Date of Descript
_	Carl J. Kuehner Mailing Address 900 Broad Avenue, S.	., #2C		Date of Receipt
_	City	State	Zip Code	1 0 0 1 2 0 0 8 Transaction ID: 81014.C19509
	Naples	FL	34102	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
N	lame of Employer self-employed	Occupatio	n	Receipt
_	Receipt For: 2008 Primary X General Other (specify)		te investor Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial)			Date of Receipt
_	Mailing Address PO Box 11660			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 81022.C19565
_	Aspen	CO	81612-9509	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		250.00
N II	lame of Employer nformation Requested	Occupatio	n ion Requested	Memo Limit Increased Due to Opponent's
F	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]
	Primary X General Other (specify) ▼		0.00	Macks Joint Fundraiser
	Full Name (Last, First, Middle Initial)			Date of Receipt
N	Mailing Address 4912 Orange Grove B	Blvd.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C	Dity	State	Zip Code	Transaction ID: 81022.C19543
<u>F</u>	Fort Myers	FL	33903	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		50.00 Receipt
N F	lame of Employer Red Diamond Real Estate	Occupatio broker	n	Limit Increased Due to Opponent's
F	Receipt For: 2008	,	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	0 0	475.00	
<u> </u>	BTOTAL of Receipts This Page (optional) .	1		550.00

	JLE A (FEC Form 3 D RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10/37 (check only one)
Any informati	on copied from such Reports are	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF	F COMMITTEE (In Full) of Connie Mack			
Full Name	e (Last, First, Middle Initial)			Date of Receipt
	ddress 609 W Francis St			M M / D D / Y Y Y Y
City		State	Zip Code	1 0 1 5 2 0 0 8 Transaction ID: 81022.C19560
<u>Aspen</u>		CO	81611-1236	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		500.00
Name of E	Employer on Requested	Occupatio		Memo
Receipt F	or: 2008		on Requested Cycle-to-Date ▼ 0.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Macks Joint Fundraiser
	e (Last, First, Middle Initial)			Date of Receipt
	ddress 2400 Harbor Blvd.,	#10		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	44 -	State	Zip Code	Transaction ID: 81014.C19507
Port Cha		FL	33952	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		200.00
Name of E	Employer on Requested	Occupatio physiciar		Receipt Limit Increased Due to Opponent's
Receipt F	or: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Prim Othe	nary X General er (specify) ▼		200.00	
Full Name	e (Last, First, Middle Initial)			Date of Receipt
Mailing Ad				10 02 2008
City		State	Zip Code	Transaction ID: 81022.C19547
Winter F	Park Park	<u>FL</u>	32789-5916	Amount of Each Receipt this Period
	umber of contributing litical committee.	C		250.00 Receipt
Name of E Self Empl	Employer loyed	Occupatio physiciar		Limit Increased Due to Opponent's
Receipt F			Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Prim Othe	nary X General er (specify) ▼	0 0	250.00	
	of Receipts This Page (optional	- I		450.00

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 37 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Friends of Connie Mack	statements may not be sold or used by any person rename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) John Miksa Mailing Address 2071 S.E. 28th Street		Date of Receipt 1 0 1 2 2 0 0 8
	City Cape Coral	State Zip Code FL 33904	Transaction ID: 81022.C19521 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Self Employed Receipt For: 2008 Primary X General Other (specify) ▼	Occupation surgeon Election Cycle-to-Date 2750.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Leslie C. Mozingo Mailing Address 4315 Woodbourne Dr.		Date of Receipt 10 15 2008
	City	State Zip Code	Transaction ID: 81022.C19556
	Clemmons FEC ID number of contributing federal political committee.	NC 27012	Amount of Each Receipt this Period 500.00
	Name of Employer The Ferguson Group	Occupation lobbyist	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial) Freeman Patten		Date of Receipt
	Mailing Address 7350 Reserve Creek D	r.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Port Saint Lucie	State Zip Code FL 34986	Transaction ID: 81022.C19550 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer retired	Occupation retired	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	Spending (2 U.S.C. 441a(i)/441a-1)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	2100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 37 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per ne name and address of any political committee	son for the purpose of soliciting contributions
Friends of Connie Mack		
Full Name (Last, First, Middle Initial) Bonne Posma		Date of Receipt
Mailing Address 12946 Kedleston Cir		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Fort Myers	State Zip Code FL 33912-6605	Transaction ID: 81022.C19542 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Saminco Inc.	Occupation Director of Companies	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) Jim Rideoutte		Date of Receipt
Mailing Address 1125 Wildwood Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Naples	State Zip Code FL 34105-3211	Transaction ID: 81022.C19538
FEC ID number of contributing federal political committee.	C 34103-3211	Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation consultant	Receipt Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Carl Schultz		Date of Receipt
Mailing Address 13785 Bald Cypress	Cir	10 05 2008
City Fort Myers	State Zip Code FL 33907-1843	Transaction ID: 81022.C19539 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33307 1043	50.00
Name of Employer Cape Coral Emergency	Occupation physician	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	Opending (2 0.0.0. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1550.00

	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 37 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14
0	any information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Friends of Connie Mack		
	Full Name (Last, First, Middle Initial) A. J. Scribante		Date of Receipt
	Mailing Address 2969 Wulfert Rd		10 15 2008
	City <u>Sanibel</u>	State Zip Code FL 33957-2214	Transaction ID: 81022.C19564
	FEC ID number of contributing federal political committee.	C 33937-2214	Amount of Each Receipt this Period 500.00
	Name of Employer Vital Learning	Occupation chairman/c.e.o.	Memo Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Macks Joint Fundraiser
_	Full Name (Last, First, Middle Initial) David Smith		Date of Receipt
	Mailing Address 225 Gulf Shore Blvd.		10 15 7 2008
	City	State Zip Code	Transaction ID: 81022.C19552
	Naples	FL 34102-8449	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00 Receipt
	Name of Employer retired	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	Speriority (2 0.3.0. 441a(I)/441a-1)
_	Full Name (Last, First, Middle Initial) Stephen Smith		Date of Receipt
	Mailing Address 3354 Mandeville Can	yon Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 81022.C19558
	Los Angeles	CA 90049-1018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer Information Requested	Occupation Information Requested	Memo Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 0.00	Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Macks Joint Fundraiser
Γ	SUBTOTAL of Receipts This Page (optional)		500.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	fo	lse separate schedule(s) or each category of the detailed Summary Page	Check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not the name and address	be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Friends of Connie Mack	the hane and address	of any political committee to	SOLION SOLINDARDING HOLLING SOLIT COMMITMECS.
Full Name (Last, First, Middle Initial) Mary Ann Stiles			Date of Receipt
Mailing Address 315 Plant Avenue			M M / D D / Y Y Y Y
City	State	Zip Code	1 0 0 7 2 0 0 8 Transaction ID: 81022.C19545
<u>Tampa</u>	FL	33606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Stiles, Taylor & Grace,	Occupation		Receipt
<u>P.A.</u>	attorney		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-	to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Augusto Villalon			Date of Receipt
Mailing Address 3859 Cruz Drive			10 03 7 9 9
City		Zip Code	Transaction ID: 81022.C19535
Saint James City	<u>FL</u>	33956	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Self Employed	Occupation		Receipt Limit Increased Due to Opponent's
Receipt For: 2008	Engineer/Cor		Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		1350.00	
Full Name (Last, First, Middle Initial) Lou Vlasho			Date of Receipt
Mailing Address 700 Fifth Avenue, S	outh		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		Zip Code	Transaction ID: 81022.C19522
Naples	<u>FL</u>	34102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00 Receipt
Name of Employer Rimaco Co.	Occupation vice-presider	nt	Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-		Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General	7.1	1 1 1 1 1 1	1
Other (specify) ▼	0 0 0	3000.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		1450.00

В.

PAGE 15/37 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11d 11c **Detailed Summary Page** 12 13a 13b 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Carol Walter Date of Receipt Mailing Address 189 E. Lake Shore Dr 2008 15 10 6th FI City State Zip Code Transaction ID: 81022.C19562 Chicago IL 60611 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Memo Name of Employer Information Requested Occupation Limit Increased Due to Opponent's Information Requested Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Receipt For: Election Cycle-to-Date 2008 Primary X General Macks Joint Fundraiser 0.00 Other (specify) Full Name (Last, First, Middle Initial) Lawrence Winnerman Date of Receipt Mailing Address 570 S Riverside Ave 15 2008 City State Zip Code Transaction ID: 81022.C19567 Aspen CO 81611-2229 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Name of Employer Information Requested Occupation Information Requested Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM] Receipt For: 2008 Election Cycle-to-Date Primary X General

SUBTOTAL of Receipts This Page (optional)	•	0.00
TOTAL This Period (last page this line number only)	•	10260.00

Other (specify)

Macks Joint Fundraiser

Γ	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 37 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15
A C	or for commercial purposes, other than using the	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Friends of Connie Mack		
۷.	Full Name (Last, First, Middle Initial) American Council of Engineering PAC		Date of Receipt
	Mailing Address 1015 15th Street NW Suite 802		10 15 2008
	City Washington	State Zip Code DC 20005	Transaction ID: 81022.C19544 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	Spending (2 U.S.C. 441a(i)/441a-1)
 3.	Full Name (Last, First, Middle Initial) B & D Pac	. L	Date of Receipt
	Mailing Address 300 N Meridian St Ste Suite 2700	e 2700	10 15 2008
	City Indianapolis	State Zip Code IN 46204-1750	Transaction ID: 81022.C19532
	FEC ID number of contributing federal political committee.	C 40204-1730	Amount of Each Receipt this Period 500.00
	Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
_ ;.	Full Name (Last, First, Middle Initial) Collier County Medical Society	_L	Date of Receipt
	Mailing Address Political Action Comm 1148 Goodlette Rd N		10 01 7 9 9 9
	City Naples	State Zip Code FL 34102	Transaction ID: 81014.C19508 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
Г		1	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 37 (check only one) 11a 11b X 11c 11d 12 13a 13b 14
A O	ny information copied from such Reports and s for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Friends of Connie Mack			
	Full Name (Last, First, Middle Initial) Darden Rest., Inc. Emp. Good Govt. Fund			Date of Receipt
	Mailing Address 5900 Lake Ellenor Dri P.O. Box 593330	ve		10 02 7 2008
	City Orlando	State FL	Zip Code 32809	Transaction ID: 81022.C19554
	FEC ID number of contributing federal political committee.		0108282	Amount of Each Receipt this Period 2500.00
	Name of Employer	Occupation	on .	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election (Cycle-to-Date ▼ 7500.00	Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Free And Strong America Pac, Inc Mailing Address PO Box 79226			Date of Receipt
		O: :	7' 0 1	10 08 2008
	City Waverley	State MA	Zip Code 02479-0226	Transaction ID: 81022.C19531 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		800.00
	Name of Employer	Occupation	on	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify)	Election (Cycle-to-Date ▼ 4435.00	Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial) KochPAC			Date of Receipt
	Mailing Address 655 15th Street, NW Suite 445			10 15 2008
	City Washington	State DC	Zip Code 20005	Transaction ID: 81022.C19555 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		0236489	1000.00
	Name of Employer	Occupation	n	Receipt Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election (Cycle-to-Date ▼ 7500.00	Spending (2 U.S.C. 441a(i)/441a-1)
Г	SUBTOTAL of Receipts This Page (optional) .	1		4300.00

SCHEDULE A (FEC Form 3)	FOR LINE NUMBER: PAGE 18/37		
•	Use separate schedule(s) for each category of the	(check only one)		
ITEMIZED RECEIPTS	Detailed Summary Page	11a 11b _X 11c 11d		
	, ,	12 13a 13b 14 15		
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)				
Friends of Connie Mack				
Full Name (Last, First, Middle Initial) Publix Supermarkets, Inc. Associates PAC		Date of Receipt		
Mailing Address PO Box 407		10 08 2008		
City	State Zip Code	Transaction ID: 81022.C19537		
<u>Lakeland</u>	FL 33802-0407	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	2000.00		
Name of Employer	Occupation	Receipt		
		Limit Increased Due to Opponent's		
Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)		
Primary X General Other (specify) ▼	2000.00			

SUBTOTAL of Receipts This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	•	8300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 37 (check only one) 11a 11b 11c 11d 11d X 12 13a 13b 14 15				
Any information copied from such Reports and St or for commercial purposes, other than using the	Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to					
NAME OF COMMITTEE (In Full) Friends of Connie Mack						
Full Name (Last, First, Middle Initial) Macks Joint Victory Fund		Date of Receipt				
Mailing Address PO Box 65168		10 15 2008				
City Washington	State Zip Code DC 20035-5168	Transaction ID: 81022.C19557 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	3892.94				
Name of Employer	Occupation	Transfers From Affil./Aut-h. Limit Increased Due to Opponent's				
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 3892.94	Spending (2 U.S.C. 441a(i)/441a-1)				

SUBTOTAL of Receipts This Page (optional)	•	3892.94
TOTAL This Period (last page this line number only)	•	3892.94

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C.

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 20/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4410 Arthur J. Finkelstein & Assoc. Date of Disbursement 10 2008 Mailing Address 16 N. Astor Street City State Zip Code Amount of Each Disbursement this Period NY 10533-Irvington 2000.00 Purpose of Disbursement Political Consulting Fee Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House POLITICAL CONSULTING FEE General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4412 Arthur J. Finkelstein & Assoc. Date of Disbursement 10 1 0 2008 Mailing Address 16 N. Astor Street City State Zip Code Amount of Each Disbursement this Period 10533-Irvington NY 1437.34 Purpose of Disbursement Expense Reimbursement Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: **EXPENSE REIMBURSEMENT** Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4411 Arthur J. Finkelstein & Assoc. Date of Disbursement 2008 Mailing Address 16 N. Astor Street City State Zip Code Amount of Each Disbursement this Period Irvington NY 10533-10000.00 Purpose of Disbursement Survey work Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: SURVEY WORK

Other (specify)

General

Primary

State:

Senate

District:

President

В.

C.

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 21/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4408 Jamestown Associates Date of Disbursement 0 7 2008 Mailing Address 5 Mapletown Road, #300 City State Zip Code Amount of Each Disbursement this Period 08540-Princeton NJ 1740.00 Purpose of Disbursement Radio Buys Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House **RADIO BUYS** General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4426 Jamestown Associates Date of Disbursement 10 1ं′0 2008 Mailing Address 5 Mapletown Road, #300 City State Zip Code Amount of Each Disbursement this Period 08540-Princeton NJ 54089.00 Purpose of Disbursement media buys Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: MEDIA BUYS Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4405 Mr. Rob Jennings Date of Disbursement 0 1 2008 Mailing Address American Event Consulting, Inc. 501 L St NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20001-1000.00 Purpose of Disbursement fundraising consulting fee Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: FUNDRAISING CONSULTING FEE Senate Primary General President Other (specify) State: District: 56829.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: (check only one) PAGE 22/37 Use separate schedule(s) for each category of the Detailed Summary Page 18 19a 19b 17 20a 20b 20c Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Las	st, First, Middle Initial)				Transaction ID: 81014.E4404 Date of Disbursement
Mailing Address 732 N Cleveland St				10 Dispulsement	
City		State	Zip Code		Amount of Each Disbursement this Pe
Arlington		VA	22201-1912		2000.00
Purpose of Dis fundraising cor					
Candidate Nan				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought:	House Senate President	Disbursement For: Primary Other (sp	General ecify) ▼	·	FUNDRAISING CONSULTING FE
State:	District:				
•	st, First, Middle Initial) ness Information, In	C.			Transaction ID: 81014.E4416 Date of Disbursement
Mailing Addres	s PO Box 193				
City Bell		State FL	Zip Code 32619-		Amount of Each Disbursement this Per
Purpose of Dis				•	130.00 Refund or Disposal of Excess
Candidate Nan	ne			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought:	House Senate President	Disbursement For: Primary Other (sp	General		NEWSPAPER CLIPPING SERVIO
State:	District:		, V		
Full Name (Las Edonation 1	st, First, Middle Initial) Account	-			Transaction ID: 81022.E4467 Date of Disbursement
Mailing Addres	s 118 N Saint A	saph St			10 M / D 15 / Y 2008
City Alexandria		State VA	Zip Code 22314-3110		Amount of Each Disbursement this Per
Purpose of Dis					44.64
fundraising fee Candidate Nan				Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought:	House Senate President	Disbursement For: Primary Other (sp	General ecify)	.) ۲۰	FUNDRAISING FEE
State:	District:				

В.

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 23/37 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4425 Business Card (formerly Platinum Plus) Date of Disbursement 10 2008 Mailing Address PO Box 15710 Citv State Zip Code Amount of Each Disbursement this Period Wilmington DE 19886-5710 20.00 Purpose of Disbursement credit card fees Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House **CREDIT CARD FEES** General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4420 Stan Lindsey Photography, Inc. Date of Disbursement 10 1 0 2008 Mailing Address 4985 Tallowood Way City State Zip Code Amount of Each Disbursement this Period **Naples** FL 34116-1049.40 Purpose of Disbursement Photography Service Fee Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: PHOTOGRAPHY SERVICE FEE Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4429 American Express Date of Disbursement 2008 Mailing Address P. O. Box 360002 City State Zip Code Amount of Each Disbursement this Period Fort Lauderdale FL 33336-7362.03 Purpose of Disbursement CREDIT CARD: SEE BELOW Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: CREDIT CARD: SEE BELOW Senate Primary General

Other (specify)

President

District:

8431.43

State:

В.

C.

age# 28934055446			
SCHEDULE B (FEC Form 3)	Use separate schedule(s)	-	NUMBER: PAGE 24/37
ITEMIZED DISBURSEMENTS	for each category of the	(check only	y one)
	Detailed Summary Page		20a 20b 20c 21
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) Friends of Connie Mack			
Full Name (Last, First, Middle Initial)			Transaction ID: 81015.E4446
The Capital Grille			Date of Disbursement
Mailing Address 601 Pennsylvania Ave.,	N.W.		10 10 7 2008
City Washington	State Zip Code DC 20004-		Amount of Each Disbursement this Period
Purpose of Disbursement	20004		301.45
meals			Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		MEMO: MEALS
State: District:			
Full Name (Last, First, Middle Initial) Castaways			Transaction ID: 81015.E4456 Date of Disbursement
Mailing Address 2025 Davis Blvd			10 10 7 2008
City Naples	State Zip Code FL 34101-		Amount of Each Disbursement this Period
Purpose of Disbursement			57.00
meals Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: MEALS
Full Name (Last, First, Middle Initial)			Transaction ID: 81015.E4445
All Road Communications			Date of Disbursement
Mailing Address 2222 4th Ave Ste A			10 10 2008
City San Diego	State Zip Code CA 92101-2112		Amount of Each Disbursement this Period
Purpose of Disbursement Satellite Telephone Rental		• •	246.70
Candidate Name		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: Senate President State: Disburs	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: SATELLITE TELEPHONE RENTAL
State. District.			

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3)

SUBTOTAL of Disbursements This Page (optional) ...

TOTAL This Period (last page this line number only)

FOR LINE NUMBER: PAGE 25/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4460 The Grape Date of Disbursement 10 1 0 2008 Mailing Address 23161 Village Shops Way City State Zip Code Amount of Each Disbursement this Period 33928-Estero FL 243.70 Purpose of Disbursement meals Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: Disbursement For: House MEMO: MEALS Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4437 AT&T- Cingular Wireless Date of Disbursement 1ं′0 10 2008 Mailing Address PO Box 31488 City State Zip Code Amount of Each Disbursement this Period 33631-3488 FL Tampa 103.99 Purpose of Disbursement telephone service Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: TELEPHONE SERVICE Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4439 AT&T- Cingular Wireless Date of Disbursement 10 2008 Mailing Address PO Box 31488 City State Zip Code Amount of Each Disbursement this Period Tampa FL 33631-3488 531.94 Purpose of Disbursement Telephone Service Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: TELEPHONE SERVICE Senate Primary General President Other (specify) State: District:

 \blacktriangleright

В.

C.

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Friends of Connie Mack

Full Name (Last, First, Middle Initial)

House

Senate

House

Senate

House

Senate

District:

Full Name (Last, First, Middle Initial)

President

District:

Full Name (Last, First, Middle Initial)

President

Bonita Springs Self Storage

Mailing Address

Bonita Springs

Candidate Name

Office Sought:

Capitol Hill Club

Mailing Address

Washington

Candidate Name

Office Sought:

Capitol Hill Club

Mailing Address

Washington

Candidate Name

Office Sought:

Purpose of Disbursement

Purpose of Disbursement

Purpose of Disbursement

City

storage

State:

City

meals

State:

City

meals

FOR LINE NUMBER: PAGE 26/37 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee Transaction ID: 81015.E4465 Date of Disbursement 10 2008 8953 Terrene Court State Zip Code Amount of Each Disbursement this Period 34135-FL 157.94 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Disbursement For: MEMO: STORAGE Primary General Other (specify) Transaction ID: 81015.E4435 Date of Disbursement 1ं′0 10 2008 300 First Street, S.E. State Zip Code Amount of Each Disbursement this Period 20003-DC 292.48 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Disbursement For: MEMO: MEALS Primary General Other (specify) Transaction ID: 81015.E4449 Date of Disbursement 10 2008 300 First Street, S.E. State Zip Code Amount of Each Disbursement this Period DC 20003-124.77 Refund or Disposal of Excess Contributions Required Under Category/ 11 C.F.R. 400.53 Type

General

Disbursement For:

Primary

[MEMO ITEM]

MEMO: MEALS

В.

C.

age# 28934055449						
SCHEDULE B (FEC Form 3)	Use separate schedule(s)	_	NUMBER: PAGE 27/37			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) X 17 18 19a 19b 20a 20b 20c 21			
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
Friends of Connie Mack						
Full Name (Last, First, Middle Initial)			Transaction ID: 81015.E4440			
Embassy Suites- Estero		Date of Disbursement				
Mailing Address 10450 Corkscrew Comn	nons Dr		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & O & S \end{smallmatrix} \end{bmatrix} $			
City Estero	State Zip Code FL 33928-9423		Amount of Each Disbursement this Period			
Purpose of Disbursement			108.72			
Fundraising Expense- lodging			Refund or Disposal of Excess Contributions Required Under			
Candidate Name		Category/ Type	11 C.F.R. 400.53			
Office Sought: House Disburs	ement For:		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE-			
Senate	Primary General		LODGING			
President State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)						
Embassy Suites- Estero			Transaction ID: 81015.E4441 Date of Disbursement			
	M M / D D / Y Y					
Mailing Address 10450 Corkscrew Comn	nons Dr		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$			
City	State Zip Code		Amount of Each Disbursement this Period			
Estero	FL 33928-9423		313.34			
Purpose of Disbursement Fundraising Expense- lodging			Refund or Disposal of Excess			
Candidate Name		Category/	Contributions Required Under			
		Type	11 C.F.R. 400.53 [MEMO ITEM]			
Office Sought: House Disburs Senate	ement For: Primary General		MEMO: FUNDRAISING EXPENSE-			
President	Other (specify)		LODGING			
State: District:						
Full Name (Last, First, Middle Initial)			Transaction ID: 81015.E4452			
FedEx			Date of Disbursement			
Mailing Address P. O. Box 1140			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$			
City Memphis	State Zip Code TN 38101-		Amount of Each Disbursement this Period			
Purpose of Disbursement			34.51			
express mail delivery Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under			
Candidate Name		Category/ Type	11 C.F.R. 400.53			
Office Sought: House Disburs	ement For:		[MEMO ITEM] MEMO: EXPRESS MAIL DELIVE-			
Senate	Primary General		RY			
President State: District:	Other (specify)					
State. DISTRICT.						
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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 28/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4453 FedEx Date of Disbursement 10 1 0 2008 Mailing Address P. O. Box 1140 City State Zip Code Amount of Each Disbursement this Period ΤN 38101-Memphis 43.17 Purpose of Disbursement express mail delivery Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] MEMO: EXPRESS MAIL DELIVE-Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4457 FedEx Date of Disbursement 10 1 0 2008 Mailing Address P. O. Box 1140 City State Zip Code Amount of Each Disbursement this Period Memphis 38101-ΤN 47.75 Purpose of Disbursement express mail delivery Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: EXPRESS MAIL DELIVE-Senate General Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4458 FedEx Date of Disbursement 10 2008 Mailing Address P. O. Box 1140 Zip Code City State Amount of Each Disbursement this Period Memphis TN 38101-38.94 Purpose of Disbursement express mail delivery Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: EXPRESS MAIL DELIVE-Senate General Primary President Other (specify) State: District: 0.00

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SCHEDULE B (FEC Form 3)	Use separate schedule(s)		NUMBER: PAGE 29/37
TEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
Friends of Connie Mack			
Full Name (Last, First, Middle Initial)			Transaction ID: 81015.E4459
Pelican Marsh Golf Club			Date of Disbursement
Mailing Address 1810 Persimmon Dr			$\begin{bmatrix} M & M & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Naples	FL 34109-0308		
Purpose of Disbursement meals		•	56.28 Refund or Disposal of Excess
Candidate Name		Category/	Contributions Required Under
		Туре	11 C.F.R. 400.53 [MEMO ITEM]
	ement For:		MEMO: MEALS
Senate President	Primary General Other (specify)		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 01015 F4447
US Airways			Transaction ID: 81015.E4447 Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 7 Park Center			10 10 2008
City	State Zip Code		Amount of Each Disbursement this Period
Pittsburgh	PA 15220-		272.00
Purpose of Disbursement travel expense- airline ticket			
Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under
		Type	11 C.F.R. 400.53
Office Sought: House Disburse	ement For:		[MEMO ITEM] MEMO: TRAVEL EXPENSE- AIR-
Senate	Primary General		LINE TICKET
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 81015.E4448 Date of Disbursement
Mailing Address 7 Park Center			$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Pittsburgh	PA 15220-		
Purpose of Disbursement		* *	442.00
travel expense- airline ticket		0.1	Refund or Disposal of Excess Contributions Required Under
Candidate Name		Category/ Type	11 C.F.R. 400.53
Office Sought: House Disburse	ement For:	. ,,,,	[MEMO ITEM]
Senate	Primary General		MEMO: TRAVEL EXPENSE- AIR- LINE TICKET
President	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			0.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	one)
	Detailed Summary Page		X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and State or for commercial purposes, other than using the nan			
NAME OF COMMITTEE (In Full) Friends of Connie Mack			
Full Name (Last, First, Middle Initial) US Airways			Transaction ID: 81015.E4442 Date of Disbursement
Mailing Address 7 Park Center			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & O \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & O & O & 8 \end{bmatrix}^Y \\ \\ \end{bmatrix}$
City Pittsburgh	State Zip Code PA 15220-		Amount of Each Disbursement this Period
Purpose of Disbursement		* *	233.50
travel expense- airline ticket Candidate Name	l	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE- AIR- LINE TICKET
Full Name (Last, First, Middle Initial) Verizon Wireless			Transaction ID: 81015.E4443 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 131 North Court House			
City Arlington	State Zip Code VA 22201-		Amount of Each Disbursement this Period
Purpose of Disbursement cell phone service		•	203.39
Candidate Name	l	Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: CELL PHONE SERVICE
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 01015 F4400
American Airlines			Transaction ID: 81015.E4438 Date of Disbursement
Mailing Address 4333 Amon Carter Blvd			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & O & O & S \end{smallmatrix} \end{bmatrix}$
City Fort Worth	State Zip Code TX 76155-		Amount of Each Disbursement this Period
Purpose of Disbursement travel expense- airline ticket			786.00 Refund or Disposal of Excess
Candidate Name	,	Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: Primary General Other (specify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE- AIR- LINE TICKET
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<u></u>	0.00

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 31/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4451 American Airlines Date of Disbursement 10 2008 Mailing Address 4333 Amon Carter Blvd City State Zip Code Amount of Each Disbursement this Period Fort Worth TX 76155-385.00 Purpose of Disbursement travel expense- airline ticket Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: Disbursement For: House MEMO: TRAVEL EXPENSE- AIR-LINE TICKET Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4464 The Veranda Date of Disbursement 10 1 0 2008 Mailing Address City State Zip Code Amount of Each Disbursement this Period **Naples** FL 34109-617.79 Purpose of Disbursement Fundraising expense- catering Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: FUNDRAISING EXPENSE-Senate General Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4454 Vergina Date of Disbursement 10 2008 Mailing Address 700 5th Ave S City State Zip Code Amount of Each Disbursement this Period **Naples** FL 34102-6604 8.36 Purpose of Disbursement meals Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: MEALS Senate General Primary President Other (specify) State: District: 0.00

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 32/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4414 Arent Fox LLP Date of Disbursement 10 2008 Mailing Address 1050 Connecticut Ave NW City State Zip Code Amount of Each Disbursement this Period Washington DC 20036-5308 4994.30 Purpose of Disbursement legal accounting and admin fees Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: LEGAL ACCOUNTING AND ADMIN Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4419 Aristotle International Date of Disbursement 10 1ं′0 2008 Mailing Address 205 Pennsylvania Avenue, SE City State Zip Code Amount of Each Disbursement this Period 20003-Washington DC 2100.00 Purpose of Disbursement Database #8 of 8 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: DATABASE #8 OF 8 Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4407 AT&T- Cingular Wireless Date of Disbursement 0 1 2008 Mailing Address PO Box 31488 City State Zip Code Amount of Each Disbursement this Period Tampa FL 33631-3488 429.32 Purpose of Disbursement cell phone service Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: **CELL PHONE SERVICE** Senate Primary General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 33/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4422 Chase Card Services Date of Disbursement 10 2008 Mailing Address PO Box 15153 Citv State Zip Code Amount of Each Disbursement this Period Wilmington DE 19886-5153 22.32 Purpose of Disbursement CREDIT CARD: SEE BELOW Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House CREDIT CARD: SEE BELOW General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4423 **Chase Card Services** Date of Disbursement 1ं′0 10 2008 Mailing Address PO Box 15153 City State Zip Code Amount of Each Disbursement this Period Wilmington 19886-5153 DE 5.37 Purpose of Disbursement Finance Charges Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: FINANCE CHARGES Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4424 Date of Disbursement 2008 Mailing Address j2 Global Communications 6922 Hollywood Blvd City State Zip Code Amount of Each Disbursement this Period Los Angeles CA 90028-16.95 Purpose of Disbursement fax services Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: FAX SERVICES Senate Primary General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 34/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4418 Jivaldi LLC Date of Disbursement 10 2008 Mailing Address 707 MOunt Errigal Pl City State Zip Code Amount of Each Disbursement this Period 95648-Lincoln CA 881.25 Purpose of Disbursement website maintenance Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House WEBSITE MAINTENANCE General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4409 J.M. Williams & Associates, Llc Date of Disbursement 1 0 08 2008 Mailing Address 522 E Park Ave Ste 201 Suite 201 City State Zip Code Amount of Each Disbursement this Period 32301-2583 Tallahassee FL 1673.78 Purpose of Disbursement Travel expense Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: TRAVEL EXPENSE Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4415 Line 1 Communications Date of Disbursement 2008 Mailing Address 3400 Birchwood Manor City State Zip Code Amount of Each Disbursement this Period Tallahassee FL 32312-1152.68 Purpose of Disbursement fax/email services Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: FAX/EMAIL SERVICES Senate Primary General President Other (specify) State: District: 3707.71

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 35/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4413 SCM Associates, Inc. Date of Disbursement 10 2008 Mailing Address 1283 Main Street PO Box 254 City State Zip Code Amount of Each Disbursement this Period Dublin NH 03444-5922.75 Purpose of Disbursement direct mail and telemarketing Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House DIRECT MAIL AND TELEMARKE-Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81014.E4417 Sprint - Embarq Date of Disbursement 10 1ं′0 2008 Mailing Address P.O. Box 740602 City State Zip Code Amount of Each Disbursement this Period 45274-Cincinnati OH 81.94 Purpose of Disbursement telephone Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: **TELEPHONE** Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 81015.E4431 St. Regis Resort Aspen Date of Disbursement 2008 Mailing Address 315 E Dean St City State Zip Code Amount of Each Disbursement this Period Aspen CO 81611-1807 1265.50 Purpose of Disbursement Macks JVF Advance- lodging Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: MACKS JVF ADVANCE-Senate General Primary LODGING President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

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FOR LINE NUMBER: PAGE 36 / 37 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 18 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Friends of Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81022.E4468 Free And Strong America Pac, Inc Date of Disbursement 15 2008 Mailing Address PO Box 79226 City State Zip Code Amount of Each Disbursement this Period Waverley MA 02479-0226 635.00 Purpose of Disbursement Refund of Contribution excessive contrib 010 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2008 House Senate X General Primary President Other (specify)

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	635.00
TOTAL This Period (last page this line number only)	•	635.00

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SCHEDULE B (FEC Form 3)

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District:

FOR LINE NUMBER: PAGE 37/37 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 18 19b **Detailed Summary Page** 20a 20b 20c 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 Connie Mack Full Name (Last, First, Middle Initial) Transaction ID: 81022.E4470 A. J. Scribante Date of Disbursement 15 2008 Mailing Address 2969 Wulfert Rd City State Zip Code Amount of Each Disbursement this Period Sanibel FL 33957-2214 500.00 Purpose of Disbursement Refund of Contribution excessive contrib 010 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2008 House X General Senate Primary

Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	500.00
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