

**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 David Jolly

ADDRESS (number and street)
▼

P. O. Box 1158

Check if different
than previously
reported. (ACC)

Indian Rocks Beach

FL

33785

2. FEC IDENTIFICATION NUMBER ▼

C

C00551572

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

12

D D /

26

Y Y Y Y /

2013

through

M M /

12

D D /

31

Y Y Y Y /

2013

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 Nancy H. Watkins

Signature of Treasurer

Nancy H. Watkins

[Electronically Filed]

Date

M M /

01

D D /

31

Y Y Y Y /

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**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of David Jolly

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 2 | 6 | | 2 | 0 | 1 | 3 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 3 |

| | 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)).... | 13200.00 | 351650.08 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 13200.00 | 351650.08 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 82136.90 | 328695.55 |
| (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)) | 82136.90 | 328695.55 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 72954.53 | |
| 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) | 71689.50 | |

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 / 18

Write or Type Committee Name

Friends of David Jolly

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 2 | 6 | | 2 | 0 | 1 | 3 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 3 | 1 | | 2 | 0 | 1 | 3 |

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).....

11800.00

322032.08

(ii) Unitemized.....

400.00

11618.00

(iii) TOTAL of contributions from individuals ▶

12200.00

333650.08

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1000.00

18000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

13200.00

351650.08

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

50000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

50000.00

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)..... ▶

13200.00

401650.08

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 18

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 82136.90 | 328695.55 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 82136.90 | 328695.55 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 141891.43 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 13200.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 155091.43 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 82136.90 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 72954.53 |

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

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

FOR LINE NUMBER:

PAGE 5 OF 18

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 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 David Jolly

| | | | |
|---|-----------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) Michael P. Bascom | | Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013 | |
| Mailing Address 8092 Ronds Pointe Court | | Transaction ID : C-24-007L01 | |
| City Tallahassee | State FL | Zip Code 32312 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2600.00 | |
| Name of Employer Michael Bascom Consulting | Occupation govt. consulting | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | Election Cycle-to-Date 2600.00 | | |
| B. Full Name (Last, First, Middle Initial) Sarah M. Bascom | | Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013 | |
| Mailing Address 8092 Ronds Pointe Court | | Transaction ID : C-25-007K01 | |
| City Tallahassee | State FL | Zip Code 32312 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2600.00 | |
| Name of Employer Bascom Communications | Occupation public relations | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | Election Cycle-to-Date 2600.00 | | |
| C. Full Name (Last, First, Middle Initial) Roy Cannon | | Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 421 Meridian Place | | Transaction ID : C-52-007W01 | |
| City Tallahassee | State FL | Zip Code 32303 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Dean Cannon, P.A. | Occupation attorney | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | Election Cycle-to-Date 1000.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | 6200.00 | |
| TOTAL This Period (last page this line number only)..... | | | |

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

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

FOR LINE NUMBER:

PAGE 6 OF 18

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Friends of David Jolly

| | | | |
|---|----------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) James L. Ferman | | Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2013 | |
| Mailing Address 1814 Richardson Place | | Transaction ID : C-112-007H01 | |
| City Tampa | State FL | Zip Code 33606 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Ferman Motor Car Co. | Occupation owner | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | Election Cycle-to-Date 500.00 | | |
| B. Full Name (Last, First, Middle Initial) Carol R. Mathews | | Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013 | |
| Mailing Address 109 Maplewood Avenue | | Transaction ID : C-251-007J01 | |
| City Clearwater | State FL | Zip Code 33765 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer n/a | Occupation retired | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | Election Cycle-to-Date 260.00 | | |
| C. Full Name (Last, First, Middle Initial) Walter McCracken | | Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2013 | |
| Mailing Address P. O. Box 908 | | Transaction ID : C-259-007F01 | |
| City Safety Harbor | State FL | Zip Code 34695 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer self-employed | Occupation consultant | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | Election Cycle-to-Date 250.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | 1000.00 | |
| TOTAL This Period (last page this line number only)..... | | | |

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

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

FOR LINE NUMBER:

PAGE 7 OF 18

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Friends of David Jolly

| | | | |
|---|--|--|--|
| A. Full Name (Last, First, Middle Initial) John Piazza | | Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013 | |
| Mailing Address 13160 110th Avenue, N. City State Zip Code Largo FL 33774 | | Transaction ID : C-307-007101 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Armed Forces History Museum | | Occupation owner | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | | Election Cycle-to-Date 1000.00 | |
| B. Full Name (Last, First, Middle Initial) Alan Suskey | | Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013 | |
| Mailing Address 3188 Nathaniel Trace City State Zip Code Tallahassee FL 32311 | | Transaction ID : C-381-007S01 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Capitol Insight | | Occupation govt. relations | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | | Election Cycle-to-Date 500.00 | |
| C. Full Name (Last, First, Middle Initial) Charles Urban | | Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 4654 Grove Park Drive City State Zip Code Tallahassee FL 32311 | | Transaction ID : C-404-007V01 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Tallahassee Dodge/Chrysler/Jeep | | Occupation auto dealer | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary | | Election Cycle-to-Date 500.00 | |
| SUBTOTAL of Receipts This Page (optional)..... | | 2000.00 | |
| TOTAL This Period (last page this line number only)..... | | | |

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

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

FOR LINE NUMBER:

PAGE 8 OF 18

(check only one)

| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Friends of David Jolly

Full Name (Last, First, Middle Initial)

Joseph M. Williams

Mailing Address 2912 Villa Rosa Park

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kimmins Contracting Corp.Occupation
president

Receipt For: 2014

☐

Primary

☐

General

☒

Other (specify)

Special Primary

Election Cycle-to-Date

2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 30 | | 2013 |

Transaction ID : C-432-007T01

Amount of Each Receipt this Period

2600.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D 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).....

2600.00

11800.00

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 18

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of David Jolly

Full Name (Last, First, Middle Initial)

A. Lockheed Martin Corporation Emp. PAC

Mailing Address 2121 Crystal Drive, #100

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 26 2013

Transaction ID : C-236-007G01

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 18

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

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NAME OF COMMITTEE (In Full)

Friends of David Jolly

Full Name (Last, First, Middle Initial)

A. Bascom Communications & Consulting

Mailing Address P. O. Box 2442

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Tallahassee | FL | 32316 |

Purpose of Disbursement
advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 26 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 4903.58 |
|---------|

Transaction ID : D8-005R03

B. Bascom Communications & Consulting

Mailing Address P. O. Box 2442

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Tallahassee | FL | 32316 |

Purpose of Disbursement
advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 26 | | 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 1347.48 |
|---------|

Transaction ID : D9-005R04

c. Bright House Networks

Mailing Address P. O. Box 30765

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Tampa | FL | 33630 |

Purpose of Disbursement
telephone/internet

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

State:

District:

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 26 | | 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 478.42 |
|--------|

Transaction ID : D14-004U02

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

6729.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

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

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NAME OF COMMITTEE (In Full)

Friends of David Jolly

Full Name (Last, First, Middle Initial)

A. Nicholas Catroppo

Mailing Address 9251 Butler Blvd.

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 30 | | 2013 |

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Brooksville | FL | 34613 |

Amount of Each Disbursement this Period

| |
|--------|
| 595.59 |
|--------|

Purpose of Disbursement
mileageCategory/
Type

Transaction ID : D19-004w03

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

State:

District:

Full Name (Last, First, Middle Initial)

B. Data Targeting, Inc.

Mailing Address 6211 N.W. 132nd Street

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 26 | | 2013 |

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Gainesville | FL | 32653 |

Amount of Each Disbursement this Period

| |
|----------|
| 31568.89 |
|----------|

Purpose of Disbursement
direct mail servicesCategory/
Type

Transaction ID : D31-002H05

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

State:

District:

Full Name (Last, First, Middle Initial)

c. Data Targeting, Inc.

Mailing Address 6211 N.W. 132nd Street

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 26 | | 2013 |

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Gainesville | FL | 32653 |

Amount of Each Disbursement this Period

| |
|---------|
| 5138.02 |
|---------|

Purpose of Disbursement
researchCategory/
Type

Transaction ID : D32-002H06

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Special Primary

State:

District:

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

37302.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 18

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

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

NAME OF COMMITTEE (In Full)

Friends of David Jolly

Full Name (Last, First, Middle Initial)

A. Decker Consulting Services

Mailing Address 244 14th Place, N.E., #2

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20002 |

Purpose of Disbursement
fundraising consulting

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) | Special Primary |

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 30 / 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Transaction ID : D33-007P01

B. David Jolly

Mailing Address P. O. Box 1158

| | | |
|--------------------|-------|----------|
| City | State | Zip Code |
| Indian Rocks Beach | FL | 33785 |

Purpose of Disbursement
see memo entries

Candidate Name

David Jolly

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: FL District: 13

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) | Special Primary |

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 30 / 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 3566.51 |
|---------|

Transaction ID : D46-000102

c. Marriot Hotels & Resorts

Mailing Address 12600 Roosevelt Blvd.

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| St. Petersburg | FL | 33716 |

Purpose of Disbursement
catering

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) | Special Primary |

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 11 / 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 3159.07 |
|---------|

Transaction ID : D2-005102

[MEMO ITEM]

Memo

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

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

5566.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 18

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

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NAME OF COMMITTEE (In Full)

Friends of David Jolly

Full Name (Last, First, Middle Initial)

A. Marriot Hotels & Resorts

Mailing Address 12600 Roosevelt Blvd.

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| St. Petersburg | FL | 33716 |

Purpose of Disbursement
event services

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) | Special Primary |

Category/
Type

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 12 / 2013 |

Amount of Each Disbursement this Period

| |
|--------|
| 392.27 |
|--------|

Transaction ID : D3-005103

[MEMO ITEM]

Memo

B. Mentzer Media Services, Inc.

Mailing Address 600 Fairmount Avenue, #306

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Towson | MD | 21286 |

Purpose of Disbursement
media placement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) | Special Primary |

Category/
Type

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 30 / 2013 |

Amount of Each Disbursement this Period

| |
|----------|
| 26303.00 |
|----------|

Transaction ID : D61-004Q07

c. StrategicDirection.com

Mailing Address 420 E. Jefferson Street

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Tallahassee | FL | 32301 |

Purpose of Disbursement
telephone calls

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2014

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) | Special Primary |

Category/
Type

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 12 / 30 / 2013 |

Amount of Each Disbursement this Period

| |
|---------|
| 6215.41 |
|---------|

Transaction ID : D83-007Q01

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

32518.41

82116.90

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 18

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☐ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Friends of David Jolly

Transaction ID : SC27

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

David Jolly

[PERSONAL FUNDS]

Election: 2014

☐ Primary☐ General☒ Other (specify) ▼
Special Primary 2014Mailing Address
P. O. Box 1158

City

State

ZIP Code

Indian Rocks Beach

FL

33785

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

M 12 / D 24 / Y 2013

Date Due

M 12 / D 24 / Y 2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

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

50000.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 18

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Friends of David Jolly

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bascom Communications & ConsultingNature of Debt (Purpose):
advertising

Mailing Address 217 S. Adams Street

City State

Zip Code

Tallahassee

FL

32301

Outstanding Balance Beginning This Period

6251.06

Transaction ID : 53

Amount Incurred This Period

0.00

Payment This Period

6251.06

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Data Targeting, Inc.Nature of Debt (Purpose):
direct mail services

Mailing Address 6211 N.W. 132nd Street

City State

Zip Code

Gainesville

FL

32653

Outstanding Balance Beginning This Period

31568.89

Transaction ID : 54

Amount Incurred This Period

0.00

Payment This Period

31568.89

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Data Targeting, Inc.Nature of Debt (Purpose):
research

Mailing Address 6211 N.W. 132nd Street

City

State

Zip Code

Gainesville

FL

32653

Outstanding Balance Beginning This Period

5138.02

Transaction ID : 55

Amount Incurred This Period

0.00

Payment This Period

5138.02

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 18

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Friends of David Jolly

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

David JollyNature of Debt (Purpose):
unreimbursed expenses

Mailing Address P. O. Box 1158

City State

Zip Code

Indian Rocks Beach

FL

33785

Outstanding Balance Beginning This Period

3566.51

Transaction ID : 56

Amount Incurred This Period

0.00

Payment This Period

3566.51

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Decker Consulting ServicesNature of Debt (Purpose):
fundraising consulting

Mailing Address 244 14th Place, N.E., #2

City State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 57

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

StrategicDirection.comNature of Debt (Purpose):
telephone calls

Mailing Address 420 E. Jefferson Street

City

State

Zip Code

Tallahassee

FL

32301

Outstanding Balance Beginning This Period

6215.41

Transaction ID : 58

Amount Incurred This Period

0.00

Payment This Period

6215.41

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 18

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Friends of David Jolly

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Crabby BillsNature of Debt (Purpose):
catering

Mailing Address 401 Gulf Blvd.

City State

Zip Code

Indian Rocks Beach

FL

33785

Outstanding Balance Beginning This Period

700.00

Transaction ID : 59

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hallmark Development of Florida, Inc.Nature of Debt (Purpose):
office rent

Mailing Address 4500 140th Avenue, N., #101

City State

Zip Code

Clearwater

FL

33762

Outstanding Balance Beginning This Period

0.00

Transaction ID : 60

Amount Incurred This Period

1444.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1444.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robert Watkins & CompanyNature of Debt (Purpose):
accounting services

Mailing Address 610 S. Boulevard

City

State

Zip Code

Tampa

FL

33606

Outstanding Balance Beginning This Period

0.00

Transaction ID : 61

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

8144.50

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 18

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Friends of David Jolly

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Data Targeting, Inc.Nature of Debt (Purpose):
survey

Mailing Address 6211 N.W. 132nd Street

City State

Zip Code

Gainesville

FL

32653

Outstanding Balance Beginning This Period

0.00

Transaction ID : 62

Amount Incurred This Period

2545.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2545.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Prosequence, LLCNature of Debt (Purpose):
political strategy

Mailing Address P. O. Box 10666

City State

Zip Code

Tallahassee

FL

32302

Outstanding Balance Beginning This Period

0.00

Transaction ID : 63

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Poli Solutions Consulting, LLCNature of Debt (Purpose):
political strategy

Mailing Address 9600 Koger Blvd., #235

City

State

Zip Code

St. Petersburg

FL

33702

Outstanding Balance Beginning This Period

0.00

Transaction ID : 64

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

13545.00

2) **TOTALS** This Period (last page this line number only) ▶

21689.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

50000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

71689.50