

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
Rebecca Negron for Congress

ADDRESS (number and street) P. O. Box 1980
Stuart FL 34995
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C C00575910
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
FL 18

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 08 / 30 / 2016 in the State of FL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 07 / 01 / 2016 through 08 / 10 / 2016

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 08 / 18 / 2016

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Rebecca Negron for Congress

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|--|---|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | <input type="text" value="123835.00"/> | <input type="text" value="1036655.59"/> |
| (b) Total Contribution Refunds (from Line 20(d)) | <input type="text" value="0.00"/> | <input type="text" value="2000.00"/> |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | <input type="text" value="123835.00"/> | <input type="text" value="1034655.59"/> |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | <input type="text" value="511845.20"/> | <input type="text" value="786851.67"/> |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | <input type="text" value="511845.20"/> | <input type="text" value="786851.67"/> |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | <input type="text" value="247728.92"/> | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="0.00"/> | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Rebecca Negron for Congress

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 100450.00 | 890271.75 |
| (ii) Unitemized | 2185.00 | 35483.84 |
| (iii) TOTAL of contributions from individuals | 102635.00 | 925755.59 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 18500.00 | 108200.00 |
| (d) The Candidate | 2700.00 | 2700.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 123835.00 | 1036655.59 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 123835.00 | 1036655.59 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 54

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 511845.20 | 786851.67 |
| 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 | 2000.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 2000.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 75.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 511845.20 | 788926.67 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 635739.12 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 123835.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 759574.12 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 511845.20 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 247728.92 |

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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)
Rebecca Negron for Congress

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

Mailing Address 1431 Riverplace Blvd., #3206

| | | |
|----------------------|-------------|-------------------|
| City Jacksonville | State FL | Zip Code 32207 |
|----------------------|-------------|-------------------|

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

| | |
|--|----------------------|
| Name of Employer UF Health Jacksonville | Occupation c.e.o. |
|--|----------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2016

Transaction ID : C-35-00GC01

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 215 S. Monroe Street, #602

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

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

| | |
|---------------------------------------|--------------------------|
| Name of Employer Cardenas Partners | Occupation consultant |
|---------------------------------------|--------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-62-00Ga01

Amount of Each Receipt this Period
 1500.00

Memo Item

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

Mailing Address 915 N.W. 1st Avenue, #2712

| | | |
|---------------|-------------|-------------------|
| City Miami | State FL | Zip Code 33136 |
|---------------|-------------|-------------------|

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

| | |
|---|-------------------------------|
| Name of Employer Fronton Holdings, LLC | Occupation general manager |
|---|-------------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-91-00Gd01

Amount of Each Receipt this Period
 750.00

Memo Item

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

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

3250.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

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

Mailing Address 3117 S. Indian River Drive

City Fort Pierce State FL Zip Code 34982

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

Name of Employer Harbor Community Bank Occupation banking exec.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : C-128-004b02

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Edward E. Burr

Mailing Address 9807 Baymeadows Road, E., #205

City Jacksonville State FL Zip Code 32256

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

Name of Employer Greenpointe Holdings Occupation c.e.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-146-00GP01

Amount of Each Receipt this Period
 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Allison P. Carter

Mailing Address 3239 Shannon Lakes Drive

City Tallahassee State FL Zip Code 32309

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

Name of Employer The Fiorentino Group Occupation principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-178-00GN01

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

2750.00

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

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

FOR LINE NUMBER: PAGE 7 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Gary R. Chartrand

Mailing Address 139 Ponte Vedra Blvd.

City State Zip Code
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation
Acosta Sales & Marketing executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-192-00G001

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Marc C. Chiurato

Mailing Address 19059 S.E. Kokomo Lane

City State Zip Code
Jupiter FL 33458

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

Name of Employer Occupation
Ambrosia Treatment Center c.f.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : C-199-00GV01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 1110 Trinity Drive

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
Capital Counsel, LLC principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : C-207-00G001

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

3950.00

**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 8 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Jonathan Costello

Mailing Address 2566 Twain Drive

City Tallahassee State FL Zip Code 32311

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

Name of Employer Rutledge Ecenia Occupation consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-226-00Gb01

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John A. Delaney

Mailing Address 110 Bowless Street

City Neptune Beach State FL Zip Code 32266

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

Name of Employer University of North Florida Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-276-00GM01

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Howell L. Ferguson

Mailing Address P. O. Box 150

City Tallahassee State FL Zip Code 32302

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

Name of Employer n/a Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : C-361-00G401

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 9 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Constance M. Fernandez

Mailing Address 1 Arvida Parkway

City State Zip Code
Coral Gables FL 33156

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-362-00Gt01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 121 Alhambra Plaza, #1100

City State Zip Code
Coral Gables FL 33134

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

Name of Employer Occupation
MBF Healthcare Partners chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-363-00Gu01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 1520 Sawgrass Village Drive, #373

City State Zip Code
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation
The Fiorentino Group govt. relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-369-003V02

Amount of Each Receipt this Period
 1500.00

Memo Item

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

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

6900.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
William S. Galvano

Mailing Address 1808 97th Street, N.W.

City Bradenton State FL Zip Code 34209

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

Name of Employer Grimes Goebel et al Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : C-417-00H501

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 3158 Inverness

City Weston State FL Zip Code 33332

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

Name of Employer Susan Goldstein Consulting, Inc. Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2016

Transaction ID : C-436-00GG01

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 133 S. Watersound Parkway

City Watersound State FL Zip Code 32413

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

Name of Employer The St. Joe Company Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016

Transaction ID : C-439-00Fb01

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Jan J. Gorrie

Mailing Address 2511 Ysabella Avenue

City Tampa State FL Zip Code 33629

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

Name of Employer Ballard Partners Occupation govt. relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-450-006D02

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Leo J. Govoni

Mailing Address 4912 Creekside Drive

City Clearwater State FL Zip Code 33760

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

Name of Employer Boston Finance Group Occupation chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-456-00Gw01

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Gerald D. Haffey

Mailing Address 5220 Hood Road, #101

City Palm Beach Gardens State FL Zip Code 33418

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

Name of Employer Ambrosia Treatment Center Occupation c.e.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : C-476-00GU01

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3450.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Dale Hedrick

Mailing Address 2200 Centrepark W. Drive, #100

| | | |
|-------------------------|-------------|-------------------|
| City West Palm Beach | State FL | Zip Code 33409 |
|-------------------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer Hedrick Brothers Construction | Occupation president |
|---|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-504-00Bt02

Amount of Each Receipt this Period
 2200.00

Memo Item

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

Mailing Address 2200 Centrepark W. Drive, #100

| | | |
|-------------------------|-------------|-------------------|
| City West Palm Beach | State FL | Zip Code 33409 |
|-------------------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer Hedrick Brothers Construction | Occupation president |
|---|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-505-00Bt03

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 2424 W. Tampa Bay Blvd., #M307

| | | |
|---------------|-------------|-------------------|
| City Tampa | State FL | Zip Code 33607 |
|---------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Hillsborough Community College | Occupation education |
|--|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-542-00Gs01

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

3200.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 54

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Dave Jonas

Mailing Address 3339 Virginia Street, #201

City Miami State FL Zip Code 33133

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

Name of Employer Fronton Holdings, LLC Occupation c.e.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 08 / 09 / 2016

Transaction ID : C-593-00H401

Amount of Each Receipt this Period
 2000.00

Memo Item

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

Mailing Address 1500 Lancewood Terrace

City Palm City State FL Zip Code 34990

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

Name of Employer n/a Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 07 / 20 / 2016

Transaction ID : C-609-00Ft01

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Richard M. Kennard

Mailing Address 4917 S.W. Lake Grove Circle

City Palm City State FL Zip Code 34990

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

Name of Employer self-employed Occupation business consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 07 / 28 / 2016

Transaction ID : C-625-00Fv01

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2750.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Gevork Khachatryan

Mailing Address 90 S.W. 3rd Street, #2314

City Miami State FL Zip Code 33130

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

Name of Employer Fronton Holdings, LLC Occupation c.f.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-628-00Ge01

Amount of Each Receipt this Period
750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John F. Kirtley

Mailing Address 511 W. Bay Street, #350

City Tampa State FL Zip Code 33606

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

Name of Employer KLH Capital Occupation investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-634-000s02

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Sydney W. Kitson

Mailing Address 7232 Horizon Drive

City West Palm Beach State FL Zip Code 33412

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

Name of Employer Kitson & Partners Occupation chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : C-635-00G201

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

6150.00

**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 15 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

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

Mailing Address P. O. Box 911

City State Zip Code
Palm Beach FL 33480

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : C-636-00G901

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Debra M. Koebel

Mailing Address 2311 Bayview Lane

City State Zip Code
North Miami FL 33181

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

Name of Employer Occupation
South Florida Automobile Dealers Assn controller

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-639-00Gm01

Amount of Each Receipt this Period
 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Christopher N. Ligor

Mailing Address 4420 W. Clear Avenue

City State Zip Code
Tampa FL 33629

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

Name of Employer Occupation
Christopher Ligor & Associates attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-681-00Gq01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

8100.00

**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 16 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Sherrie A. Ligori

Mailing Address 4420 W. Clear Avenue

City Tampa State FL Zip Code 33629

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

Name of Employer n/a Occupation homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-682-00Gr01

Amount of Each Receipt this Period
800.00

Memo Item

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

Mailing Address 3200 Polo Place

City Plant City State FL Zip Code 33566

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

Name of Employer Zymphony Technology Solutions Occupation owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-693-00Gh01

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1769 N. Loop Parkway

City St. Augustine State FL Zip Code 32095

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

Name of Employer Flagler Hospital Occupation physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-702-00GQ01

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2300.00

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

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

FOR LINE NUMBER: PAGE 17 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
James L. Magazine

Mailing Address 2136 Scarlet Oaks Street

City Clearwater State FL Zip Code 33759

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

Name of Employer The Law Offices of Lucas Magazine Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-707-00Gp01

Amount of Each Receipt this Period
800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lynne M. Magazine

Mailing Address 2136 Scarlet Oaks Street

City Clearwater State FL Zip Code 33759

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

Name of Employer n/a Occupation homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-708-00Go01

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mary E. Mahon

Mailing Address 3640 Darnell Place

City Jacksonville State FL Zip Code 32217

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

Name of Employer Occupation legal assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-721-00GI01

Amount of Each Receipt this Period
250.00

Memo Item

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

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

3750.00

**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 18 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

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

Mailing Address 3606 Point Pleasant Road

| | | |
|----------------------|-------------|-------------------|
| City Jacksonville | State FL | Zip Code 32217 |
|----------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------|
| Name of Employer n/a | Occupation homemaker |
|-------------------------|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-722-00GH01

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4717 Highland Place Circle

| | | |
|------------------|-------------|-------------------|
| City Lakeland | State FL | Zip Code 33813 |
|------------------|-------------|-------------------|

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

| | |
|---|-------------------------------|
| Name of Employer Southern Strategy Group | Occupation govt. relations |
|---|-------------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-754-00GZ02

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 31 W. Adams Street, #204

| | | |
|------------------------|-------------|-------------------|
| City Fleming Island | State FL | Zip Code 32003 |
|------------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer The Fiorentino Group | Occupation principal |
|--|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-774-00GD01

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1500.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Charlene Neal

Mailing Address 1003 59th Street, N.W.

| | | |
|-------------------|-------------|-------------------|
| City Bradenton | State FL | Zip Code 34209 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Charlene Neal Pure Style, Inc. | Occupation president |
|--|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : C-804-00Fy01

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 1003 59th Street, N.W.

| | | |
|-------------------|-------------|-------------------|
| City Bradenton | State FL | Zip Code 34209 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Charlene Neal Pure Style, Inc. | Occupation president |
|--|-------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : C-805-00Fy02

Amount of Each Receipt this Period
2700.00

Memo Item

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

Mailing Address 5800 Lakewood Ranch Blvd.

| | | |
|------------------|-------------|-------------------|
| City Sarasota | State FL | Zip Code 34240 |
|------------------|-------------|-------------------|

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

| | |
|--------------------------------------|---------------------------|
| Name of Employer Neal Communities | Occupation real estate |
|--------------------------------------|---------------------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : C-806-00Fz01

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

8100.00

**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 20 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Patrick Neal

Mailing Address 5800 Lakewood Ranch Blvd.

City Sarasota State FL Zip Code 34240

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

Name of Employer Neal Communities Occupation real estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : C-807-00Fz02

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gregory P. Nelson

Mailing Address 1806 Ocean Drive

City Vero Beach State FL Zip Code 32963

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

Name of Employer Bernard Egan & Company Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : C-814-00H901

Amount of Each Receipt this Period
350.00

Memo Item

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

Mailing Address 40 Edgehill Way

City San Jose State CA Zip Code 95127

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : C-824-00G801

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

5750.00

**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 21 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
William T. Phillips

Mailing Address P. O. Box 50730

City: Knoxville State: TN Zip Code: 37950

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

Name of Employer: Phillips and Jordan, Inc. Occupation: c.e.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 08 / 01 / 2016

Transaction ID : C-865-00GA01

Amount of Each Receipt this Period: 2700.00

Memo Item

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

Mailing Address P. O. Box 50730

City: Knoxville State: TN Zip Code: 37950

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

Name of Employer: Phillips and Jordan, Inc. Occupation: executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 08 / 01 / 2016

Transaction ID : C-866-00GB01

Amount of Each Receipt this Period: 2700.00

Memo Item

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

Mailing Address 110 S.E. 6th Street, 15th Floor

City: Fort Lauderdale State: FL Zip Code: 33301

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

Name of Employer: Tripp Scott Occupation: chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 08 / 2016

Transaction ID : C-961-00Gy01

Amount of Each Receipt this Period: 1000.00

Memo Item

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

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

6400.00

**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 22 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
David Shepp

Mailing Address 6387 Ashley Drive

City State Zip Code
Lakeland FL 33813

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

Name of Employer Occupation
Southern Strategy Grp. Tampa govt. relations

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-978-00Gc01

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 530 N. Ride

City State Zip Code
Tallahassee FL 32302

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

Name of Employer Occupation
Cardenas Partners consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : C-980-00GE01

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 19553 N.E. 37th Avenue

City State Zip Code
Miami FL 33180

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-985-00H101

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3000.00

**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 23 OF 54 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Kathryn Simpson

Mailing Address P. O. Box 721

City State Zip Code
Trilby FL 33593

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-989-00Gj01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address P. O. Box 721

City State Zip Code
Trilby FL 33593

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

Name of Employer Occupation
Simpson Environmental Services president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-991-00Gi01

Amount of Each Receipt this Period
 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Jonathan M. Stanton

Mailing Address 840 Sandpine Drive, N.E.

City State Zip Code
St. Petersburg FL 33703

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

Name of Employer Occupation
Lema Construction president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-1021-00Gi01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 24 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Linda Teetz

Mailing Address 1280 Olde Doubloon Drive

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
n/a retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2016

Transaction ID : C-1052-00G101

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Stella F. Thayer

Mailing Address P. O. Box 429

City State Zip Code
Thonotosassa FL 33592

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

Name of Employer Occupation
Tamp Bay Downs president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : C-1055-00G301

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Enrique A. Tomeu

Mailing Address 1450 Centrepark Blvd., #100

City State Zip Code
West Palm Beach FL 33401

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

Name of Employer Occupation
self-employed accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : C-1070-00G701

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

3950.00

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

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

FOR LINE NUMBER: PAGE 25 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Teresa Tomeu

Mailing Address 6815 S. Flagler Drive

City State Zip Code
West Palm Beach FL 33405

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : C-1071-00G601

Amount of Each Receipt this Period
 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
A. Trey Traviesa

Mailing Address 416 S. Royal Palm Way

City State Zip Code
Tampa FL 33609

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

Name of Employer Occupation
Fort Brooke Merchant Partners c.e.o.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-1073-00Gf01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address 1713 Trotter Court

City State Zip Code
Wellington FL 33414

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

Name of Employer Occupation
Wantman Group, Inc. engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-1110-00Gx01

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 26 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
William W. Weatherford

Mailing Address 5626 Killian Path

City Wesley Chapel State FL Zip Code 33543

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

Name of Employer Weatherford Partners Occupation managing partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-1116-00H201

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Joseph M. Williams

Mailing Address 1501 E. 2nd Avenue

City Tampa State FL Zip Code 33605

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

Name of Employer Kimmins Corp. Occupation construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-1143-00Gn01

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Dana D. Young

Mailing Address 1807 W. Richardson Place

City Tampa State FL Zip Code 33606

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

Name of Employer State of Florida Occupation legislator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : C-1153-00Gk01

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

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

_____ 2500.00

_____ 100450.00

**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 27 OF 54 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue, N.W., #60

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20036 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00004275

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : C-21-00HC01

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Avenue, N.W., #60

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20001 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00000422

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : C-23-00G501

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Florida Citrus Mutual PAC

Mailing Address 411 E. Orange Street

| | | |
|------------------|-------------|-------------------|
| City Lakeland | State FL | Zip Code 33801 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00131607

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : C-377-00F402

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

11500.00

**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 28 OF 54 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Las Vegas Sands Corp. PAC

Mailing Address 3355 Las Vegas Blvd., S.

City Las Vegas State NV Zip Code 89109

FEC ID number of contributing federal political committee. **C C00399642**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2016

Transaction ID : C-664-00Fw01

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Pfizer, Inc. PAC

Mailing Address 235 E. 42nd Street

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2016

Transaction ID : C-863-00Fu01

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Supporting United States of America Next L

Mailing Address 9425 N. Meridian Street, #237

City Indianapolis State IN Zip Code 46260

FEC ID number of contributing federal political committee. **C C00564385**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2016

Transaction ID : C-1041-00Fc01

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 29 OF 54
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Victory and Freedom PAC

Mailing Address 1666 K. Street, N.W., #500

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00525212

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016

Transaction ID : C-1098-00FY01

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Memo Item

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

Memo Item

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

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

1000.00

18500.00

**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 30 OF 54 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. Full Name (Last, First, Middle Initial)
Rebecca Negron

Mailing Address P. O. Box 1980

City State Zip Code
Stuart FL 34995

FEC ID number of contributing federal political committee. **C** H6FL18055

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : C-813-000101

Amount of Each Receipt this Period
 2700.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

2700.00

2700.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 31 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

A. City of Port St. Lucie

Full Name (Last, First, Middle Initial)
Mailing Address 121 S.W. Port St. Lucie Blvd., #B

City Port Saint Lucie State FL Zip Code 34984

Purpose of Disbursement sign permit

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2016

Amount of Each Disbursement this Period: 250.00

Memo Item

Transaction ID : D42-00Fe01

B. City of Port St. Lucie

Full Name (Last, First, Middle Initial)
Mailing Address 121 S.W. Port St. Lucie Blvd., #B

City Port Saint Lucie State FL Zip Code 34984

Purpose of Disbursement sign permit

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2016

Amount of Each Disbursement this Period: 25.00

Memo Item

Transaction ID : D43-00Fe02

C. Comcast

Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 105184

City Atlanta State GA Zip Code 30348

Purpose of Disbursement telephone/internet

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2016

Amount of Each Disbursement this Period: 435.09

Memo Item

Transaction ID : D45-00Fd01

SUBTOTAL of Disbursements This Page (optional) 710.09

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 32 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Comcast | | Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016 |
| Mailing Address P. O. Box 105184 | | Amount of Each Disbursement this Period 189.14 |
| City Atlanta | State GA | |
| Zip Code 30348 | Purpose of Disbursement telephone/internet | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D46-00Fd02 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Cutting Edge | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016 |
| Mailing Address 1826 S.W. Renfro Street | | Amount of Each Disbursement this Period 42.60 |
| City Port St. Lucie | State FL | |
| Zip Code 34953 | Purpose of Disbursement printing | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D49-008E03 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 3068.00 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement social media consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D66-003301 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3299.74 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 54 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 20093.11 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement direct mail services | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D67-00330J |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 6673.56 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement direct mail services | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D68-00330K |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 10000.00 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement research | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D69-00330L |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 36766.67 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 54 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 11988.41 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement direct mail services | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D70-00330M |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 20349.19 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement direct mail services | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D71-00330N |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Data Targeting, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016 |
| Mailing Address 6211 N.W. 132nd Street | | Amount of Each Disbursement this Period 2560.76 |
| City Gainesville | State FL | |
| Zip Code 32653 | Purpose of Disbursement advertising/voter data | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D72-00330O |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 34898.36 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 35 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. EM Campaigns, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2016 |
| Mailing Address P. O. Box 10362 | | Amount of Each Disbursement this Period 5000.00 |
| City Tallahassee | State FL | |
| Zip Code 32302 | Purpose of Disbursement campaign consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D81-006a06 |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. EM Campaigns, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2016 |
| Mailing Address P. O. Box 10362 | | Amount of Each Disbursement this Period 5000.00 |
| City Tallahassee | State FL | |
| Zip Code 32302 | Purpose of Disbursement campaign consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D82-006a07 |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. EM Campaigns, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2016 |
| Mailing Address P. O. Box 10362 | | Amount of Each Disbursement this Period 631.18 |
| City Tallahassee | State FL | |
| Zip Code 32302 | Purpose of Disbursement direct mail svcs/travel | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D83-006a08 |
| State: District: | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 10631.18 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 36 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. eDonations | | Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016 |
| Mailing Address 117 N. Saint Asaph Street | | Amount of Each Disbursement this Period 3309.33 |
| City Alexandria | State VA | |
| Zip Code 22314 | Purpose of Disbursement online fundraising | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D98-00060F |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. eDonations | | Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016 |
| Mailing Address 117 N. Saint Asaph Street | | Amount of Each Disbursement this Period 76.94 |
| City Alexandria | State VA | |
| Zip Code 22314 | Purpose of Disbursement online fundraising | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D99-00060G |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Election Connections, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016 |
| Mailing Address P. O. Box 10866 | | Amount of Each Disbursement this Period 1283.37 |
| City Tallahassee | State FL | |
| Zip Code 32302 | Purpose of Disbursement telephone calls | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D101-008e02 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4669.64 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 37 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | | | |
|---|--|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Election Connections, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016 | |
| Mailing Address P. O. Box 10866 | | | Amount of Each Disbursement this Period 751.15 | |
| City Tallahassee | State FL | Zip Code 32302 | Memo Item <input type="checkbox"/> | |
| Purpose of Disbursement telephone calls | | Category/ Type | | |
| Candidate Name | | Transaction ID : D102-008e03 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Florida U.C. Fund | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2016 | |
| Mailing Address 5050 W. Tennessee Street | | | Amount of Each Disbursement this Period 256.50 | |
| City Tallahassee | State FL | Zip Code 32399 | Memo Item <input type="checkbox"/> | |
| Purpose of Disbursement payroll taxes | | Category/ Type | | |
| Candidate Name | | Transaction ID : D108-004o04 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) c. G. Foley's | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016 | |
| Mailing Address 3212 W. 23rd St., #4 | | | Amount of Each Disbursement this Period 4706.00 | |
| City Panama City | State FL | Zip Code 32405 | Memo Item <input type="checkbox"/> | |
| Purpose of Disbursement catering | | Category/ Type | | |
| Candidate Name | | Transaction ID : D110-00FV01 | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5713.65 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 38 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Daniel R. Groves | | Date of Disbursement MM / DD / YYYY 07 / 29 / 2016 |
| Mailing Address 5622 S.W. Marvel Street | | Amount of Each Disbursement this Period 1664.40 |
| City Palm City | State FL | |
| Zip Code 34990 | Purpose of Disbursement salary | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D116-008s05 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Hamilton Printing, Inc. | | Date of Disbursement MM / DD / YYYY 08 / 10 / 2016 |
| Mailing Address 799 N.E. Dixie Highway | | Amount of Each Disbursement this Period 2168.39 |
| City Jensen Beach | State FL | |
| Zip Code 34957 | Purpose of Disbursement printing | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D117-00HJ01 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Caroline M. Hill | | Date of Disbursement MM / DD / YYYY 07 / 29 / 2016 |
| Mailing Address 5302 S.W. Markel Street | | Amount of Each Disbursement this Period 1752.00 |
| City Palm City | State FL | |
| Zip Code 34990 | Purpose of Disbursement salary | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D136-000k0E |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5584.79 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 39 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

Full Name (Last, First, Middle Initial)
A. Martin County Republican Exec. Comm.

Mailing Address 111 S.E. Federal Highway, #130

City Stuart State FL Zip Code 34994

Purpose of Disbursement event sponsorship

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 07 / 2016

Amount of Each Disbursement this Period
500.00

Memo Item

Transaction ID : D147-00Fa01

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

Mailing Address P. O. Box 250663

City Holly Hill State FL Zip Code 32125

Purpose of Disbursement see memo entries

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 14 / 2016

Amount of Each Disbursement this Period
1416.47

Memo Item

Transaction ID : D149-00Fg01

Full Name (Last, First, Middle Initial)
c. Office Depot

Mailing Address 6600 N. Military Trail

City Boca Raton State FL Zip Code 33496

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 05 / 2016

Amount of Each Disbursement this Period
62.50

Memo Item

Transaction ID : D5-00Fi01
Memo

SUBTOTAL of Disbursements This Page (optional)..... 1916.47

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 40 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Office Depot | | Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2016 |
| Mailing Address 6600 N. Military Trail | | Amount of Each Disbursement this Period 95.14 |
| City Boca Raton | State FL | |
| Zip Code 33496 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D6-00FI02 Memo |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Office Depot | | Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2016 |
| Mailing Address 6600 N. Military Trail | | Amount of Each Disbursement this Period 9.00 |
| City Boca Raton | State FL | |
| Zip Code 33496 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D7-00FI03 Memo |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Office Depot | | Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2016 |
| Mailing Address 6600 N. Military Trail | | Amount of Each Disbursement this Period 27.98 |
| City Boca Raton | State FL | |
| Zip Code 33496 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D8-00FI04 Memo |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 41 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Office Depot | | Date of Disbursement MM / DD / YYYY 06 / 20 / 2016 |
| Mailing Address 6600 N. Military Trail | | Amount of Each Disbursement this Period 32.63 |
| City Boca Raton | State FL | |
| Zip Code 33496 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D9-00FI05 Memo |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Office Depot | | Date of Disbursement MM / DD / YYYY 06 / 17 / 2016 |
| Mailing Address 6600 N. Military Trail | | Amount of Each Disbursement this Period 98.78 |
| City Boca Raton | State FL | |
| Zip Code 33496 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D10-00FI06 Memo |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Publix | | Date of Disbursement MM / DD / YYYY 07 / 02 / 2016 |
| Mailing Address 3300 Publix Corporate Parkway | | Amount of Each Disbursement this Period 22.48 |
| City Lakeland | State FL | |
| Zip Code 33811 | Purpose of Disbursement food & beverage | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D11-008p03 Memo |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 42 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Publix | | Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016 |
| Mailing Address 3300 Publix Corporate Parkway | | Amount of Each Disbursement this Period 37.61 |
| City Lakeland | State FL | |
| Zip Code 33811 | Purpose of Disbursement food & beverage | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D12-008p04 Memo |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Publix | | Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2016 |
| Mailing Address 3300 Publix Corporate Parkway | | Amount of Each Disbursement this Period 24.69 |
| City Lakeland | State FL | |
| Zip Code 33811 | Purpose of Disbursement food & beverage | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D13-008p05 Memo |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Publix | | Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2016 |
| Mailing Address 3300 Publix Corporate Parkway | | Amount of Each Disbursement this Period 135.46 |
| City Lakeland | State FL | |
| Zip Code 33811 | Purpose of Disbursement food & beverage | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D14-008p06 Memo |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 43 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Publix | | Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2016 |
| Mailing Address 3300 Publix Corporate Parkway | | Amount of Each Disbursement this Period 54.08 |
| City Lakeland State FL Zip Code 33811 | Purpose of Disbursement food & beverage | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D15-008p07 |
| State: District: | | Memo |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Publix | | Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2016 |
| Mailing Address 3300 Publix Corporate Parkway | | Amount of Each Disbursement this Period 38.94 |
| City Lakeland State FL Zip Code 33811 | Purpose of Disbursement food & beverage | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D16-008p08 |
| State: District: | | Memo |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Staples | | Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2016 |
| Mailing Address 500 Staples Drive | | Amount of Each Disbursement this Period 60.62 |
| City Framingham State MA Zip Code 01702 | Purpose of Disbursement office supplies | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D19-00Fk01 |
| State: District: | | Memo |

| | |
|---|-------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 44 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 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)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016 |
| Mailing Address 500 Staples Drive | | Amount of Each Disbursement this Period 19.46 |
| City Framingham | State MA | |
| Zip Code 01702 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D20-00Fk02 Memo |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016 |
| Mailing Address 500 Staples Drive | | Amount of Each Disbursement this Period 73.48 |
| City Framingham | State MA | |
| Zip Code 01702 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D21-00Fk03 Memo |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Staples | | Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2016 |
| Mailing Address 500 Staples Drive | | Amount of Each Disbursement this Period 42.39 |
| City Framingham | State MA | |
| Zip Code 01702 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D22-00Fk04 Memo |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 45 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement MM / DD / YYYY 06 / 15 / 2016 |
| Mailing Address 500 Staples Drive | | Amount of Each Disbursement this Period 40.87 |
| City Framingham | State MA | |
| Zip Code 01702 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D23-00Fk05 Memo |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement MM / DD / YYYY 06 / 17 / 2016 |
| Mailing Address 500 Staples Drive | | Amount of Each Disbursement this Period 85.21 |
| City Framingham | State MA | |
| Zip Code 01702 | Purpose of Disbursement office supplies | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D24-00Fk06 Memo |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. GA McKeown & Associates, LLC | | Date of Disbursement MM / DD / YYYY 07 / 28 / 2016 |
| Mailing Address P. O. Box 250663 | | Amount of Each Disbursement this Period 5000.00 |
| City Holly Hill | State FL | |
| Zip Code 32125 | Purpose of Disbursement campaign management | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : D151-00Ec02 |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5000.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 54 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | | | | |
|---|--|-------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Mentzer Media Services, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016 | | |
| Mailing Address 210 W. Pennsylvania Ave., #250 | | | Amount of Each Disbursement this Period 154900.00 | | |
| City Towson | State MD | Zip Code 21204 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement media placement | | Category/ Type | | | |
| Candidate Name | | Transaction ID : D153-006k02 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|-------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mentzer Media Services, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2016 | | |
| Mailing Address 210 W. Pennsylvania Ave., #250 | | | Amount of Each Disbursement this Period 199724.00 | | |
| City Towson | State MD | Zip Code 21204 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement media placement | | Category/ Type | | | |
| Candidate Name | | Transaction ID : D154-006k03 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

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|---|--|-------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) c. Ross Consulting, LLC | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2016 | | |
| Mailing Address 3580 Mossy Creek Lane | | | Amount of Each Disbursement this Period 1659.35 | | |
| City Tallahassee | State FL | Zip Code 32311 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement fundraising expense | | Category/ Type | | | |
| Candidate Name | | Transaction ID : D211-002k0H | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 356283.35 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 47 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 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)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Ross Consulting, LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016 |
| Mailing Address 3580 Mossy Creek Lane | | Amount of Each Disbursement this Period 1500.00 |
| City Tallahassee | State FL | |
| Zip Code 32311 | Purpose of Disbursement fundraising consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D212-002k0l |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ross Consulting, LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016 |
| Mailing Address 3580 Mossy Creek Lane | | Amount of Each Disbursement this Period 2887.00 |
| City Tallahassee | State FL | |
| Zip Code 32311 | Purpose of Disbursement fundraising consulting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D213-002k0J |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Stone Photography | | Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016 |
| Mailing Address 812 S.E. Highpoint Way | | Amount of Each Disbursement this Period 1219.00 |
| City Hobe Sound | State FL | |
| Zip Code 33455 | Purpose of Disbursement photography | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D224-008F02 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5606.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 48 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Tapco Underwriters, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016 | |
| Mailing Address P. O. Box 17069 | | | Amount of Each Disbursement this Period 477.34 | |
| City Clearwater | State FL | Zip Code 33762 | <input type="checkbox"/> Memo Item | |
| Purpose of Disbursement insurance | | Category/ Type | Transaction ID : D226-00E102 | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) B. The Tarrance Group, Inc. | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016 | |
| Mailing Address 201 N. Union Street, #410 | | | Amount of Each Disbursement this Period 17097.00 | |
| City Alexandria | State VA | Zip Code 22314 | <input type="checkbox"/> Memo Item | |
| Purpose of Disbursement survey | | Category/ Type | Transaction ID : D227-00FU01 | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) C. U.S. Postal Service | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016 | |
| Mailing Address 4411 S.E. Federal Highway | | | Amount of Each Disbursement this Period 940.00 | |
| City Stuart | State FL | Zip Code 34997 | <input type="checkbox"/> Memo Item | |
| Purpose of Disbursement postage | | Category/ Type | Transaction ID : D233-003M03 | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 18514.34 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 54 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. U.S. Treasury | | Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2016 |
| Mailing Address P. O. Box 105078 | | Amount of Each Disbursement this Period 889.60 |
| City Atlanta | State GA | |
| Zip Code 30348 | Purpose of Disbursement payroll taxes | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D247-002t0E |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. The Victory Group, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2016 |
| Mailing Address 1220 Hillshire Road | | Amount of Each Disbursement this Period 16500.00 |
| City Baltimore | State MD | |
| Zip Code 21222 | Purpose of Disbursement media production | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D251-006p04 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Visa | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016 |
| Mailing Address P. O. Box 30131 | | Amount of Each Disbursement this Period 135.00 |
| City Tampa | State FL | |
| Zip Code 33630 | Purpose of Disbursement see memo entries | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type | Transaction ID : D252-00GF01 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 17524.60 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 50 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) A. Bank of Tampa | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016 |
| Mailing Address 601 Bayshore Blvd. | | Amount of Each Disbursement this Period 25.00 |
| City Tampa | State FL Zip Code 33606 | |
| Purpose of Disbursement service charge | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : D1-002104 Credit Card Item |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. Visa | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016 |
| Mailing Address P. O. Box 30131 | | Amount of Each Disbursement this Period 527.86 |
| City Tampa | State FL Zip Code 33630 | |
| Purpose of Disbursement see memo entries | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : D253-00GF02 |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) c. Bank of Tampa | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016 |
| Mailing Address 601 Bayshore Blvd. | | Amount of Each Disbursement this Period 25.00 |
| City Tampa | State FL Zip Code 33606 | |
| Purpose of Disbursement service charge | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | Transaction ID : D1-002107 Credit Card Item |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 527.86 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 51 OF 54 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. U.S. Postal Service | | Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2016 |
| Mailing Address 4411 S.E. Federal Highway | | Amount of Each Disbursement this Period 476.45 |
| City Stuart | State FL | |
| Zip Code 34997 | Purpose of Disbursement postage | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D3-003M02 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Credit Card Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Visa | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016 |
| Mailing Address P. O. Box 30131 | | Amount of Each Disbursement this Period 25.00 |
| City Tampa | State FL | |
| Zip Code 33630 | Purpose of Disbursement see memo entry | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D254-00GF03 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Bank of Tampa | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016 |
| Mailing Address 601 Bayshore Blvd. | | Amount of Each Disbursement this Period 25.00 |
| City Tampa | State FL | |
| Zip Code 33606 | Purpose of Disbursement service charge | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D1-002I05 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Credit Card Item |
| State: District: | | |

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|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 25.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 54 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20 | | | | |

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NAME OF COMMITTEE (In Full)
Rebecca Negron for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Visa | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016 |
| Mailing Address P. O. Box 30131 | | Amount of Each Disbursement this Period 25.00 |
| City Tampa | State FL | |
| Zip Code 33630 | Purpose of Disbursement see memo entry | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D255-00GF04 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Bank of Tampa | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2016 |
| Mailing Address 601 Bayshore Blvd. | | Amount of Each Disbursement this Period 25.00 |
| City Tampa | State FL | |
| Zip Code 33606 | Purpose of Disbursement service charge | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D1-002106 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Credit Card Item |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Robert Watkins & Company, P.A. | | Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016 |
| Mailing Address 610 S. Boulevard | | Amount of Each Disbursement this Period 2750.00 |
| City Tampa | State FL | |
| Zip Code 33606 | Purpose of Disbursement accounting services | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | Transaction ID : D267-004p08 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2775.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 OF 54 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 20d | <input type="checkbox"/> 19c 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)
Rebecca Negron for Congress

| | | | | | |
|---|--|------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Woodlawn Park, LLC | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016 | | |
| Mailing Address 875 S.E. Monterey Commons Blvd. | | | Amount of Each Disbursement this Period 795.00 | | |
| City Stuart | State FL | Zip Code 34996 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement office rent | | Category/ Type | | | |
| Candidate Name | | Transaction ID : D272-00Dv02 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Woodlawn Park, LLC | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016 | | |
| Mailing Address 875 S.E. Monterey Commons Blvd. | | | Amount of Each Disbursement this Period 303.46 | | |
| City Stuart | State FL | Zip Code 34996 | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement utilities | | Category/ Type | | | |
| Candidate Name | | Transaction ID : D273-00Dv03 | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | | |
| Mailing Address | | | Amount of Each Disbursement this Period | | |
| City | State | Zip Code | Memo Item <input type="checkbox"/> | | |
| Purpose of Disbursement | | Category/ Type | | | |
| Candidate Name | | Transaction ID : | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | |
| State: District: | | | | | |

| | |
|---|-----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1098.46 |
| TOTAL This Period (last page this line number only)..... | 511545.20 |

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Rebecca Negrón for Congress

| | | |
|---|-------------------|-------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Tarrance Group | | Nature of Debt (Purpose): survey |
| Mailing Address 201 N. Union Street, #410 | | |
| City State Alexandria VA | Zip Code 22314 | |

| | | | |
|---|---------------------------------|---|--|
| Outstanding Balance Beginning This Period 17097.00 | | Transaction ID : 53 | |
| Amount Incurred This Period 0.00 | Payment This Period 17097.00 | Outstanding Balance at Close of This Period 0.00 | |

| | | |
|--|----------|---------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City State | Zip Code | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Outstanding Balance at Close of This Period | |
| Amount Incurred This Period | Payment This Period | | |

| | | |
|--|----------|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City State | Zip Code | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Outstanding Balance at Close of This Period | |
| Amount Incurred This Period | Payment This Period | | |

| | |
|--|------|
| 1) SUBTOTALS This Period This Page (optional) | 0.00 |
| 2) TOTALS This Period (last page this line number only) | 0.00 |
| 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) ▶ | |