

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
TREASURE COAST JOBS COALITION

ADDRESS (number and street) 601 PENNSYLVANIA AVENUE NW
NORTH BUILDING SUITE 1000
 Check if different than previously reported. (ACC) WASHINGTON DC 20004

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00524793 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 18 / 2012 through M M / D D / Y Y Y Y Y Y 11 / 26 / 2012

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 James Tyrrell III

Signature of Treasurer James Tyrrell III [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 06 / 2012

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 3X (Rev. 02/2003)

Write or Type Committee Name

TREASURE COAST JOBS COALITION

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="666754.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="105000.00"/>	<input type="text" value="2262000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="771754.99"/>	<input type="text" value="2262000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="664834.72"/>	<input type="text" value="2155079.73"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="106920.27"/>	<input type="text" value="106920.27"/>
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"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

TREASURE COAST JOBS COALITION

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	105000.00	2262000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	105000.00	2262000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	105000.00	2262000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	105000.00	2262000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	105000.00	2262000.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	15188.49	91118.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15188.49	91118.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	649646.23	2063961.09
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	664834.72	2155079.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	664834.72	2155079.73

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	105000.00	2262000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105000.00	2262000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15188.49	91118.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15188.49	91118.64

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
TREASURE COAST JOBS COALITION

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

Mailing Address 35 Parkview Avenue

City State Zip Code
Bronxville NY 10708

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

Name of Employer Occupation
Self Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2012
Transaction ID : SA11AI.4187

Amount of Each Receipt this Period
2500.00

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

Mailing Address 974 South Ocean Blvd.

City State Zip Code
Palm Beach FL 33480

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

Name of Employer Occupation
Oxbow Carbon, LLC President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.4185

Amount of Each Receipt this Period
100000.00

Full Name (Last, First, Middle Initial)
C. Patriot Risk Services

Mailing Address 401 E. Las Olas Blvd
Suite 1510

City State Zip Code
Fort Lauderdale FL 33301

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.4189

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	105000.00
TOTAL This Period (last page this line number only).....▶	105000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
TREASURE COAST JOBS COALITION

Full Name (Last, First, Middle Initial)

A. Clark Hill PLC

Mailing Address 601 Pennsylvania Avenue NW
Suite 1000N

City Washington State DC Zip Code 20004

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2012

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Clark Hill PLC

Mailing Address 601 Pennsylvania Avenue NW
Suite 1000N

City Washington State DC Zip Code 20004

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2012

Transaction ID : SB21B.4191

Amount of Each Disbursement this Period

5050.99

Full Name (Last, First, Middle Initial)

C. Mercury Public Affairs LLC

Mailing Address 137 Fifth Avenue
3rd Floor

City New York State NY Zip Code 10010

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2012

Transaction ID : SB21B.4193

Amount of Each Disbursement this Period

5000.00

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

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

15050.99

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
TREASURE COAST JOBS COALITION

Full Name (Last, First, Middle Initial)

A. Mercury Public Affairs LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2012			

Mailing Address 137 Fifth Avenue
3rd Floor

City New York State NY Zip Code 10010

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

137.50

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

B.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

C.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

137.50

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

15188.49

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Mercury Public Affairs LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 137 Fifth Avenue 3rd Floor		Amount 9439.20
City New York	State NY	Zip Code 10010
Purpose of Expenditure Direct Mail Production	Category/ Type	Transaction ID : SE.4198
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1445904.06		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Mercury Public Affairs LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 137 Fifth Avenue 3rd Floor		Amount 9326.70
City New York	State NY	Zip Code 10010
Purpose of Expenditure Direct Mail Production	Category/ Type	Transaction ID : SE.4202
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1869849.02		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	18765.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Tyrrell III

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mercury Public Affairs LLC		Date MM / DD / YYYY 10 / 31 / 2012
Mailing Address 137 Fifth Avenue 3rd Floor		Amount 9326.70
City New York	State NY	Zip Code 10010
Purpose of Expenditure Direct Mail Production	Category/ Type	Transaction ID : SE.4205
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2004000.61		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Mercury Public Affairs LLC		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 137 Fifth Avenue 3rd Floor		Amount 9826.70
City New York	State NY	Zip Code 10010
Purpose of Expenditure Direct Mail Production	Category/ Type	Transaction ID : SE.4207
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2038894.20		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	19153.40
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Tyrrell III

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 06 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Smart Media Group LLC		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 814 King Street Suite 400		Amount 400270.00
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media Buy	Category/Type	Transaction ID : SE.4199
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1846174.06		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Smart Media Group LLC		Date MM / DD / YYYY 10 / 30 / 2012
Mailing Address 814 King Street Suite 400		Amount 99758.00
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure Media Buy	Category/Type	Transaction ID : SE.4204
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1994673.91		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	500028.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Tyrrell III

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 06 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Something Else Strategies, LLC		Date MM / DD / YYYY 10 / 18 / 2012
Mailing Address 112 Lantern Ridge Drive		Amount 22150.00
City Easley	State SC	Zip Code 29642
Purpose of Expenditure Media Production	Category/Type	Transaction ID : SE.4197
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1436464.86		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 3200 Summit Blvd.		Amount 14348.26
City West Palm Beach	State FL	Zip Code 33416
Purpose of Expenditure Direct Mail Postage	Category/Type	Transaction ID : SE.4200
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1860522.32		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	36498.26
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Tyrrell III

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 06 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 10 / 29 / 2012
Mailing Address 3200 Summit Blvd.		Amount 25066.89
City West Palm Beach	State FL	
Zip Code 33416	Transaction ID : SE.4203	
Purpose of Expenditure Direct Mail Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1894915.91		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 10 / 31 / 2012
Mailing Address 3200 Summit Blvd.		Amount 25066.89
City West Palm Beach	State FL	
Zip Code 33416	Transaction ID : SE.4206	
Purpose of Expenditure Direct Mail Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2029067.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50133.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Tyrrell III

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 06 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 3200 Summit Blvd.		Amount 25066.89
City West Palm Beach	State FL	
Zip Code 33416	Transaction ID : SE.4208	
Purpose of Expenditure Direct Mail Production	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2063961.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Zip Code	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure		Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	25066.89
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	649646.23

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

James Tyrrell III

Signature _____ [Electronically Filed] Date MM / DD / YYYY
12 / 06 / 2012