

# 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

Bev Slough for Congress

ADDRESS (number and street)

3501 N. Ponce de Leon Blvd.

Suite B, #368

Check if different than previously reported. (ACC)

St. Augustine

FL

32084

2. FEC IDENTIFICATION NUMBER ▼

C C00517979

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 04 / 01 / 2012

through

M M /

D D /

Y Y Y Y 06 / 30 / 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 Deborah A. Johnson

Signature of Treasurer Deborah A. Johnson

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 07 / 15 / 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.

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Bev Slough 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))....	54453.86	54453.86
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	54453.86	54453.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	26569.00	26569.00
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	26569.00	26569.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	37884.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	10000.00	

**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

**Bev Slough for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	43861.46	43861.46
(ii) Unitemized.....	10592.40	10592.40
(iii) TOTAL of contributions from individuals ▶	54453.86	54453.86
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	54453.86	54453.86
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	10000.00	10000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	10000.00	10000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	64453.86	64453.86

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	26569.00	26569.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	26569.00	26569.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	64453.86
25. SUBTOTAL (add Line 23 and Line 24).....	64453.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26569.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37884.86

**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 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Abare**

Mailing Address 112 Herons Nest Lane

City St. Augustine State FL Zip Code 32080

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

Name of Employer Flagler College Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4306**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**John Adams**

Mailing Address 627 Magnolia Avenue

City St. Johns State FL Zip Code 32259

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2012

**Transaction ID : SA11AI.4157**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4473 Swilcan Bridge Lane N.

City Jacksonville State FL Zip Code 32224

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

Name of Employer Ring Power Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4280**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

**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 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Louise Anderson**

Mailing Address 3224 Turtle Creek Road

City St. Augustine State FL Zip Code 32086

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

Name of Employer Carr, Riggs & Ingram, CPAs Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : SA11AI.4145**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Louise Anderson**

Mailing Address 3224 Turtle Creek Road

City St. Augustine State FL Zip Code 32086

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

Name of Employer Carr, Riggs & Ingram, CPAs Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4364**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mark Bailey**

Mailing Address 1200 Plantation Island Drive Suite 210

City St. Augustine State FL Zip Code 32080

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

Name of Employer The Bailey Group Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4318**

Amount of Each Receipt this Period  
2500.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory Baker**

Mailing Address 39 Valencia Street

City St. Augustine State FL Zip Code 32084

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

Name of Employer Thompson Baker Occupation Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2012

**Transaction ID : SA11AI.4472**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kristanna Barnes**

Mailing Address 857 Old Grove Manor

City Jacksonville State FL Zip Code 32207

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4302**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Tracy Belcik**

Mailing Address 1030 Larkspur Loop

City St. Johns State FL Zip Code 32259

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : SA11AI.4416**

Amount of Each Receipt this Period  
 1000.00

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

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

1750.00

**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 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Claudia Berry**

Mailing Address 1817 Autumnbrook Lane

City St. Johns State FL Zip Code 32259

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2012

**Transaction ID : SA11AI.4480**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Wayne Blanton**

Mailing Address 1319 Peacefield Place

City Tallahassee State FL Zip Code 32308

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

Name of Employer Florida School Boards Assn Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4371**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Letti Bozard**

Mailing Address 601 Peggy Place

City St. Augustine State FL Zip Code 32086

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

Name of Employer Bozard Ford Lincoln Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.4350**

Amount of Each Receipt this Period  
**500.00**

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

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

**1100.00**



**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 41  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Katherine Bravo**

Mailing Address 913 E. Pleasant Place

City State Zip Code  
St. Johns FL 32259

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

Name of Employer Occupation  
JCP Cares President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 11 / 2012

**Transaction ID : SA11AI.4265**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ann Breidenstein**

Mailing Address 14 Perkins Lane

City State Zip Code  
Palm Coast FL 32164

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

Name of Employer Occupation  
United Way of St. Johns County Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 11 / 2012

**Transaction ID : SA11AI.4254**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Campbell**

Mailing Address 1594 Scottridge Lane

City State Zip Code  
St. Johns FL 32259

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

Name of Employer Occupation  
New York Life Insurance Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 19 / 2012

**Transaction ID : SA11AI.4322**

Amount of Each Receipt this Period  
250.00

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 10 OF 41  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George Cassel**

Mailing Address 2005 East Clovelly Lane

City State Zip Code  
St. Augustine FL 32092

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

Name of Employer Occupation  
North Florida Yacht Sales President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4256**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Cassel**

Mailing Address 1151 Perregrine Circle W.

City State Zip Code  
St. Johns FL 32259

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

Name of Employer Occupation  
North Florida Yacht Sales Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4257**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Childs**

Mailing Address 4121 Scott Drive

City State Zip Code  
Rowlett TX 75088

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2012

**Transaction ID : SA11AI.4411**

Amount of Each Receipt this Period  
400.00

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 11 OF 41  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Christine Cothron**  
 Mailing Address 228 Redfish Creek Drive  
 City State Zip Code  
 St. Augustine FL 32095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 First Coast Technical College President  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2012  
**Transaction ID : SA11AI.4304**  
 Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Pam Cramer**  
 Mailing Address 10612 Quail Ridge Drive  
 City State Zip Code  
 Ponte Vedra FL 32081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Homemaker  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2012  
**Transaction ID : SA11AI.4438**  
 Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**David Dill**  
 Mailing Address 1289 Creek Bend Road  
 City State Zip Code  
 St. Johns FL 32259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Gate Petroleum Vice President  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2012  
**Transaction ID : SA11AI.4385**  
 Amount of Each Receipt this Period  
 250.00

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

750.00

**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 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Heidi Eddins**

Mailing Address 606 Stafford Lane

City St. Augustine State FL Zip Code 32086

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2012

**Transaction ID : SA11AI.4440**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Carol Fehling**

Mailing Address 1000 Vicars Landing Way  
Apt. H210

City Ponte Vedra Beach State FL Zip Code 32082

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4273**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1196 Salt Marsh Circle

City Ponte Vedra Beach State FL Zip Code 32082

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

Name of Employer K. Fehling & Associates Occupation Executive Recruiter

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Fehling**

Mailing Address 1196 Salt Marsh Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
St. Johns County Schools Board Member

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2012

**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1196 Salt Marsh Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
St. Johns County Schools Board Member

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 11 / 2012

**Transaction ID : SA11AI.4277**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Finley**

Mailing Address 9453 Angleridge Road

City State Zip Code  
Dallas TX 75238

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

Name of Employer Occupation  
JFA Consulting Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2012

**Transaction ID : SA11AI.4464**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 41  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Hershey**

Mailing Address 352 SW Ridge Lane

City State Zip Code  
Stuart FL 34994

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

Name of Employer Occupation  
Martin County Schools Board Member

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4334**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Darlene Hinson**

Mailing Address 1282 Creighton Bluff Lane

City State Zip Code  
Jacksonville FL 32223

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.4191**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Donald Hinson**

Mailing Address 1282 Creighton Bluff Lane

City State Zip Code  
Jacksonville FL 32223

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

Name of Employer Occupation  
Hinson Properties Owner

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.4189**

Amount of Each Receipt this Period  
 2500.00

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

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

5250.00

**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 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Hood**

Mailing Address 14775 Old St. Augustine Road

City Jacksonville	State FL	Zip Code 32258
----------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : SA11AI.4126**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Deborah A. Johnson**

Mailing Address 5310 Hampton Gable Court W.

City Jacksonville	State FL	Zip Code 32257
----------------------	-------------	-------------------

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

Name of Employer Self-employed	Occupation CPA
-----------------------------------	-------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2236.46

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : SA11AI.4497**

Amount of Each Receipt this Period  
2136.46

In-kind - Travel/Lodging to DC for RNC Campaign Workshop

**C.** Full Name (Last, First, Middle Initial)  
**Jay Johnson**

Mailing Address 5310 Hampton Gable Court W.

City Jacksonville	State FL	Zip Code 32257
----------------------	-------------	-------------------

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

Name of Employer FIS	Occupation Financial Analyst
-------------------------	---------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4296**

Amount of Each Receipt this Period  
250.00

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

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

2636.46

**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 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jay Johnson**

Mailing Address 5310 Hampton Gable Court W.

City Jacksonville	State FL	Zip Code 32257
----------------------	-------------	-------------------

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

Name of Employer FIS	Occupation Financial Analyst
-------------------------	---------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4444**

Amount of Each Receipt this Period  
2250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lorna MacDonald**

Mailing Address 398 Marsh Point Circle

City St. Augustine	State FL	Zip Code 32080
-----------------------	-------------	-------------------

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

Name of Employer Raintree Restaurant	Occupation Owner
---	---------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4344**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lorna MacDonald**

Mailing Address 398 Marsh Point Circle

City St. Augustine	State FL	Zip Code 32080
-----------------------	-------------	-------------------

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

Name of Employer Raintree Restaurant	Occupation Owner
---	---------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2012

**Transaction ID : SA11AI.4505**

Amount of Each Receipt this Period  
650.00  
In-kind - Fundraiser-Food and Beverages

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

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

3150.00



**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 17 OF 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Martin**

Mailing Address 12464 Blueberry Woods Circle W.

City Jacksonville	State FL	Zip Code 32258
----------------------	-------------	-------------------

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

Name of Employer LPS	Occupation Program/Project Manager
-------------------------	---------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.4442**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jane Mathis**

Mailing Address 116 Fiddler Crab Lane

City St. Augustine	State FL	Zip Code 32080
-----------------------	-------------	-------------------

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

Name of Employer Olde Carriage Realty	Occupation Realtor
--	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4271**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jane Mathis**

Mailing Address 116 Fiddler Crab Lane

City St. Augustine	State FL	Zip Code 32080
-----------------------	-------------	-------------------

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

Name of Employer Olde Carriage Realty	Occupation Realtor
--	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1075.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.4507**

Amount of Each Receipt this Period  
825.00  
In-kind - Fundraiser-Food and Beverages

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

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

2075.00

**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 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Martha Mickler**

Mailing Address 30 Spanish Street

City State Zip Code  
St. Augustine FL 32084

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

Name of Employer Occupation  
St. Johns County Schools Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 11 / 2012

**Transaction ID : SA11AI.4278**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Bernadette Moran**

Mailing Address 3312 St. Johns Avenue

City State Zip Code  
Jacksonville FL 32205

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 11 / 2012

**Transaction ID : SA11AI.4292**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Brad Nelson**

Mailing Address 214 Edgewater Branch Drive

City State Zip Code  
St. Johns FL 32259

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

Name of Employer Occupation  
Certus Appraisal Group Property Appraiser

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 11 / 2012

**Transaction ID : SA11AI.4260**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Ponder-Stansel**

Mailing Address 237 Rainey Avenue

City St. Augustine State FL Zip Code 32084

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

Name of Employer Community Hospice of NE FL Occupation Hospice Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2012

**Transaction ID : SA11AI.4456**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ray Quinn**

Mailing Address 1097 Winterhawk Drive

City St. Augustine State FL Zip Code 32086

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4259**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Rhoden**

Mailing Address 10125 Scott Mill Road

City Jacksonville State FL Zip Code 32257

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.4195**

Amount of Each Receipt this Period  
**500.00**

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

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

**1000.00**

**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 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Ringhaver**

Mailing Address 5855 State Road 13 N.

City St. Augustine State FL Zip Code 32092

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4502**

Amount of Each Receipt this Period  
1900.00

In-kind - Fundraiser-Food and Beverages

**B.** Full Name (Last, First, Middle Initial)  
**Randy Ringhaver**

Mailing Address 5855 State Road 13 N.

City St. Augustine State FL Zip Code 32092

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

Name of Employer Ring Power Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4499**

Amount of Each Receipt this Period  
1900.00

In-kind - Fundraiser - Food and Beverages

**C.** Full Name (Last, First, Middle Initial)  
**Allan Roberts**

Mailing Address 4175 State Road 16

City St. Augustine State FL Zip Code 32092

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

Name of Employer Self-employed Occupation Rancher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4258**

Amount of Each Receipt this Period  
500.00

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

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

4300.00

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

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

FOR LINE NUMBER: PAGE 21 OF 41  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Rockenbach**

Mailing Address 1120 Celebration Court

City St. Johns State FL Zip Code 32259

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 22 / 2012**

**Transaction ID : SA11AI.4166**

Amount of Each Receipt this Period  
**900.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jesse Rowe**

Mailing Address 11016 Citron Court

City Jacksonville State FL Zip Code 32223

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 19 / 2012**

**Transaction ID : SA11AI.4324**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Terry Sharkey**

Mailing Address 690 Nottingham Forest Circle

City St. Johns State FL Zip Code 32259

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

Name of Employer Bank of America Occupation Systems Analyst

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 18 / 2012**

**Transaction ID : SA11AI.4117**

Amount of Each Receipt this Period  
**500.00**

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

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

**1900.00**

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

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

FOR LINE NUMBER: PAGE 22 OF 41  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 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)  
**Bev Slough for Congress**

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

Mailing Address 4015 Lewis Speed Way

City State Zip Code  
St. Augustine FL 32084

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

Name of Employer Occupation  
St. Johns County Sheriff's Ofc Sheriff

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4267**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Julie Simmons**

Mailing Address 96056 Piney Island Drive

City State Zip Code  
Fernandina Beach FL 32034

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

Name of Employer Occupation  
FIS Human Resources

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2012

**Transaction ID : SA11AI.4103**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Julie Simmons**

Mailing Address 96056 Piney Island Drive

City State Zip Code  
Fernandina Beach FL 32034

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

Name of Employer Occupation  
FIS Human Resources

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4282**

Amount of Each Receipt this Period  
100.00

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

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

1100.00

**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 41
	<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	

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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sharon Stone**

Mailing Address 3408 State Road 13 North

City St. Johns State FL Zip Code 32259

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2012

**Transaction ID : SA11AI.4197**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Christopher Strickland**

Mailing Address 2535 Deerwood Lane

City St. Augustine State FL Zip Code 32084

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

Name of Employer St. Johns County Sheriff's Ofc Occupation Commander

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4252**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**John Sundeman**

Mailing Address P.O. Box 2196

City St. Augustine State FL Zip Code 32085

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

Name of Employer Self-employed Occupation CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : SA11AI.4111**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

**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 24 OF 41
	<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	

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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. John Sundeman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address P.O. Box 2196		<b>Transaction ID : SA11AI.4490</b>
City St. Augustine	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-employed	Occupation CPA	Amount of Each Receipt this Period 500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Rebecca Taus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2012
Mailing Address 708 Oak Cove Court		<b>Transaction ID : SA11AI.4173</b>
City St. Johns	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RT Publishing	Occupation Publisher	Amount of Each Receipt this Period 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Rene Tercilla</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012
Mailing Address 7080 Wilson Road		<b>Transaction ID : SA11AI.4420</b>
City West Palm Beach	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Tercilla Courtemanche Architec	Occupation President	Amount of Each Receipt this Period 500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Tidball**

Mailing Address 1705 Crystal Court

City St. Johns State FL Zip Code 32259

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

Name of Employer Comcast Occupation Business Account Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4285**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Turnage**

Mailing Address 2820 Windemere Court

City Middleburg State FL Zip Code 32068

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

Name of Employer Islands Mechanical Occupation CFO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2012

**Transaction ID : SA11AI.4373**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**W. Sherman Turnage**

Mailing Address 917 E. Pleasant Place

City St. Johns State FL Zip Code 32259

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

Name of Employer Self-employed Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2012

**Transaction ID : SA11AI.4383**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

**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 26 OF 41
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>Frank Upchurch III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2012	
Mailing Address 4148 Creekbluff Drive		<b>Transaction ID : SA11AI.4155</b>	
City State Zip Code St. Augustine FL 32086	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period _____ 500.00		
Name of Employer Occupation Upchurch, Bailey and Upchurch Attorney	Election Cycle-to-Date _____ 500.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Frank Upchurch III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2012	
Mailing Address 4148 Creekbluff Drive		<b>Transaction ID : SA11AI.4289</b>	
City State Zip Code St. Augustine FL 32086	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period _____ 250.00		
Name of Employer Occupation Upchurch, Bailey and Upchurch Attorney	Election Cycle-to-Date _____ 750.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Katherine Upchurch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2012	
Mailing Address 4148 Creekbluff Drive		<b>Transaction ID : SA11AI.4287</b>	
City State Zip Code St. Augustine FL 32086	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period _____ 250.00		
Name of Employer Occupation Upchurch, Bailey and Upchurch Attorney	Election Cycle-to-Date _____ 250.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 41
	<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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bobby Walton**

Mailing Address 279 Sophia Terrace

City St. Augustine State FL Zip Code 32095

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

Name of Employer Insuramerica Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2012

**Transaction ID : SA11AI.4369**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Ward**

Mailing Address 2435 US Hwy 1 South

City St. Augustine State FL Zip Code 32086

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

Name of Employer Ward Medical Services Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4445**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bert Watson**

Mailing Address 1699 Bishop Estates Road

City St. Johns State FL Zip Code 32259

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

Name of Employer US Financial Assets Occupation Investment Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4314**

Amount of Each Receipt this Period  
 750.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 41
	<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)  
**Bev Slough for Congress**

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

Mailing Address 2807 Evercharm Place

City Jacksonville	State FL	Zip Code 32257
----------------------	-------------	-------------------

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

Name of Employer Watson Realty	Occupation President
-----------------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : SA11AI.4153**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**W. F. Weaver**

Mailing Address 9432 Baymeadows Way  
Suite 150

City Jacksonville	State FL	Zip Code 32256
----------------------	-------------	-------------------

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

Name of Employer Weaver Realty Group	Occupation President
---	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : SA11AI.4209**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Russ Weeks**

Mailing Address 1132 River Birch Road

City St. Johns	State FL	Zip Code 32259
-------------------	-------------	-------------------

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

Name of Employer U.S. Army Corps of Engineers	Occupation Engineer
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2012

**Transaction ID : SA11AI.4454**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 29 OF 41  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Angela White**

Mailing Address 1614 Rain Crow Drive

City St. Johns State FL Zip Code 32259

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

Name of Employer Living Waters Preschool Occupation Teacher

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 26 / 2012

**Transaction ID : SA11AI.4201**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ellen Whitmer**

Mailing Address 1178 Natures Hammock Road S.

City St. Johns State FL Zip Code 32259

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2012

**Transaction ID : SA11AI.4300**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Louann Williams**

Mailing Address 1096 Oak Vale Road

City St. Johns State FL Zip Code 32259

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

Name of Employer Fisherman's Dock Occupation Owner

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 18 / 2012

**Transaction ID : SA11AI.4377**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 41  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Walter Williams**

Mailing Address 10450 San Jose Blvd.

City Jacksonville State FL Zip Code 32257

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

Name of Employer Occupation  
Walter Williams Property Mgmt Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4253**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Colleen Wood**

Mailing Address 1540 Ansley Place

City St. Johns State FL Zip Code 32259

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

Name of Employer Occupation  
Save Duval Schools Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2012

**Transaction ID : SA11AI.4251**

Amount of Each Receipt this Period  
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

43861.46

**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 31 OF 41
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**Bev Slough for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BEVERLY ANN SLOUGH**

Mailing Address **341 W ADELAIDE DR**

City **ST JOHNS** State **FL** Zip Code **32259**

FEC ID number of contributing federal political committee. **C H2FL06141**

Name of Employer **St. Johns County School Board** Occupation **Board Chairman**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 04 / 2012**

**Transaction ID : SA13A.4107**

Amount of Each Receipt this Period  
**5000.00**

**B.** Full Name (Last, First, Middle Initial)  
**BEVERLY ANN SLOUGH**

Mailing Address **341 W ADELAIDE DR**

City **ST JOHNS** State **FL** Zip Code **32259**

FEC ID number of contributing federal political committee. **C H2FL06141**

Name of Employer **St. Johns County School Board** Occupation **Board Chairman**

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 25 / 2012**

**Transaction ID : SA13A.4165**

Amount of Each Receipt this Period  
**5000.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**10000.00**

**10000.00**

**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 32 OF 41	
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dixie Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 128 River Cove Circle		Amount of Each Disbursement this Period 1748.46 <b>Transaction ID : SB17.4521</b>
City St. Augustine State FL Zip Code 32086	Purpose of Disbursement Notecards, envelopes, bumper and lapel stickers	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dixie Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2012
Mailing Address 128 River Cove Circle		Amount of Each Disbursement this Period 11999.89 <b>Transaction ID : SB17.4525</b>
City St. Augustine State FL Zip Code 32086	Purpose of Disbursement Campaign Signs	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dixie Strategies, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2012
Mailing Address 128 River Cove Circle		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.4526</b>
City St. Augustine State FL Zip Code 32086	Purpose of Disbursement Strategy Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15748.35
<b>TOTAL</b> 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 41	
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. Donald Hinson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2012
Mailing Address 1282 Creighton Bluff Lane		Amount of Each Disbursement this Period 239.18 <b>Transaction ID : SB17.4527</b>
City Jacksonville	State FL Zip Code 32223	
Purpose of Disbursement Reimbursement - See detail below described as "memo item"		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Deborah A. Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 5310 Hampton Gable Court W.		Amount of Each Disbursement this Period 2136.46 <b>Transaction ID : SB17.4498</b>
City Jacksonville	State FL Zip Code 32257	
Purpose of Disbursement In-kind - Travel/Lodging to DC for RNC Campaign Workshop		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lorna MacDonald</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address 398 Marsh Point Circle		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : SB17.4506</b>
City St. Augustine	State FL Zip Code 32080	
Purpose of Disbursement In-kind - Fundraiser-Food and Beverages		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3025.64
<b>TOTAL</b> 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 41	
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. MailChimp</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 150.00
City Atlanta	State GA Zip Code 30318	
Purpose of Disbursement Reimbursement to Slough for Emailing Services		Transaction ID : SB17.4518
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jane Mathis</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 116 Fiddler Crab Lane		Amount of Each Disbursement this Period 825.00
City St. Augustine	State FL Zip Code 32080	
Purpose of Disbursement In-kind - Fundraiser-Food and Beverages		Transaction ID : SB17.4508
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Nonie's</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 1790 Kel Lane		Amount of Each Disbursement this Period 988.68
City Middleburg	State FL Zip Code 32068	
Purpose of Disbursement Fundraiser - Food and Beverages		Transaction ID : SB17.4537
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1813.68
<b>TOTAL</b> 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 41			
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. Prosperity Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 12689 San Jose Boulevard		Amount of Each Disbursement this Period 189.79
City Jacksonville	State FL Zip Code 32223	
Purpose of Disbursement Charges for credit card fees		Transaction ID : SB17.4551
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paula Ringhaver</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 5855 State Road 13 N.		Amount of Each Disbursement this Period 1900.00
City St. Augustine	State FL Zip Code 32092	
Purpose of Disbursement In-kind - Fundraiser-Food and Beverages		Transaction ID : SB17.4504
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Randy Ringhaver</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 5855 State Road 13 N.		Amount of Each Disbursement this Period 1900.00
City St. Augustine	State FL Zip Code 32092	
Purpose of Disbursement In-kind - Fundraiser - Food and Beverages		Transaction ID : SB17.4501
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3989.79
<b>TOTAL</b> 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 41			
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. BEVERLY ANN SLOUGH</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2012
Mailing Address 341 W ADELAIDE DR		Amount of Each Disbursement this Period 557.63 <b>Transaction ID : SB17.4512</b>
City ST JOHNS State FL Zip Code 32259	Purpose of Disbursement Reimbursement - see detail below described as "memo item"	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 06		

Full Name (Last, First, Middle Initial) <b>B. BEVERLY ANN SLOUGH</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 341 W ADELAIDE DR		Amount of Each Disbursement this Period 181.75 <b>Transaction ID : SB17.4530</b>
City ST JOHNS State FL Zip Code 32259	Purpose of Disbursement Reimbursement - See detail below described as "memo item"	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 06		

Full Name (Last, First, Middle Initial) <b>c. Supervisor of Elections-Duval County</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2012
Mailing Address 105 East Monroe Street		Amount of Each Disbursement this Period 12.40 <b>Transaction ID : SB17.4568</b> <b>[MEMO ITEM]</b>
City Jacksonville State FL Zip Code 32202	Purpose of Disbursement Reimbursement to Hinson for fee for petition verification	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	739.38
<b>TOTAL</b> 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 41	
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. Supervisor of Elections-Nassau County</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2012
Mailing Address 96135 Nassau Place Suite3		Amount of Each Disbursement this Period 11.60
City Yulee	State FL Zip Code 32097	
Purpose of Disbursement Reimbursement to Hinson for fee for petition verification		Transaction ID : SB17.4569
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Supervisor of Elections-St. Johns County</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 4455 Avenue A #101		Amount of Each Disbursement this Period 22.00
City St. Augustine	State FL Zip Code 32095	
Purpose of Disbursement Reimbursement to Slough for map of congressional district		Transaction ID : SB17.4572
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Supervisor of Elections-Variou Counties</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address Various Counties		Amount of Each Disbursement this Period 112.00
City Various Cities	State FL Zip Code 32095	
Purpose of Disbursement Reimbursement to Slough for fees for petition verification		Transaction ID : SB17.4536
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 41	
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. Team Sports Fan</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2012
Mailing Address 445 State Road 13 Suite 25		Amount of Each Disbursement this Period 215.18
City St. Johns State FL Zip Code 32259	Purpose of Disbursement Reimbursement to Hinson for campaign t-shirts	
Candidate Name	Category/Type	Transaction ID : SB17.4529 <b>[MEMO ITEM]</b>
Office Sought: House Senate President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Team Sports Fan</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 445 State Road 13 Suite 25		Amount of Each Disbursement this Period 793.73
City St. Johns State FL Zip Code 32259	Purpose of Disbursement Campaign T-shirts	
Candidate Name	Category/Type	Transaction ID : SB17.4523
Office Sought: House Senate President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. U.S. Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 138 Sea Grove Main Street		Amount of Each Disbursement this Period 47.75
City St. Augustine State FL Zip Code 32080	Purpose of Disbursement Reimbursement to Slough for postage	
Candidate Name	Category/Type	Transaction ID : SB17.4535 <b>[MEMO ITEM]</b>
Office Sought: House Senate President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	793.73
<b>TOTAL</b> 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 41	
	<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)  
**Bev Slough for Congress**

Full Name (Last, First, Middle Initial) <b>A. UPS Store</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address 450-106 State Road 13, North		Amount of Each Disbursement this Period 265.00
City State Zip Code St. Johns FL 32259	Purpose of Disbursement Reimbursement to Slough for printing of candidate petitions	
Candidate Name	Category/Type	<b>Transaction ID : SB17.4513</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2012
Mailing Address 2355 US Hwy 1, South		Amount of Each Disbursement this Period 121.87
City State Zip Code St. Augustine FL 32086	Purpose of Disbursement Reimbursement to Slough for campaign cell phone	
Candidate Name	Category/Type	<b>Transaction ID : SB17.4515</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2012
Mailing Address 2355 US Hwy 1, South		Amount of Each Disbursement this Period 20.76
City State Zip Code St. Augustine FL 32086	Purpose of Disbursement Reimbursement to Slough for canvassing supplies	
Candidate Name	Category/Type	<b>Transaction ID : SB17.4517</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	26110.57

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Bev Slough for Congress

Transaction ID : SC/10.4107

LOAN SOURCE Full Name (Last, First, Middle Initial)  
BEVERLY ANN SLOUGH

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
341 W ADELAIDE DR

City State ZIP Code  
ST JOHNS FL 32259

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 04 / D 04 / Y 2012 M M / D D / On Demand 0.00 % (apr)  Yes  No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4165**  
**Bev Slough for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BEVERLY ANN SLOUGH</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 341 W ADELAIDE DR	

City	State	ZIP Code
ST JOHNS	FL	32259

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 25 / Y 2012	M / D / Y On Demand	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	10000.00

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