

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

ADDRESS (number and street) 214 South Bronough Street
Check if different than previously reported. (ACC) Tallahassee FL 32302

2. **FEC IDENTIFICATION NUMBER** C00005561
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 09 01 2010 through 09 30 2010

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 Alma Gonzalez

Signature of Treasurer Electronically Filed by Alma Gonzalez Date 03 10 2011

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 3X** (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

Transfers received from the DNC, DCCC, DSCC and candidate committees, not including ASDC/Dollars for Democrats and DNC Victory Fund, were not for joint fundraising. None of the transfer in money received from the DNC or DCCC was used in the payments made for exempt activities. None of the expenses listed on Line 21b were public communications or FEA activities. None of the expenditures listed on Line 30b were expressed advocacy. The payments listed on H4, including all consulting fees, were administrative/committee fundraising expenses and not FEA nor in connection with a federal election. Payroll and all related expenses reported on Schedule H4 were for staff that did not spend more than 25% of their time on FEA or in connection with a federal election.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		726822.32
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	1743587.86									
(c) Total Receipts (from Line 19)	1598503.13	4435661.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3342090.99	5162484.26								
7. Total Disbursements (from Line 31)	1419072.03	3177589.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1923018.96	1984895.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	18541.50									

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

For further information contact:

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

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

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	385732.90	1107021.35
(ii) Unitemized	6182.00	60754.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)	391914.90	1182800.64
(b) Political Party Committees	585903.23	1139593.31
(c) Other Political Committees (such as PACs)	14402.00	103302.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	992220.13	2425695.95
12. Transfers From Affiliated/Other Party Committees	189876.00	1098049.31
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	7476.05	39947.89
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	890.08
17. Other Federal Receipts (Dividends, Interest, etc.)	47.10	878.90
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	408883.85	870199.81
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	408883.85	870199.81
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1598503.13	4435661.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1189619.28	3565462.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	24652.05	220782.08
(ii) Non-Federal Share.....	93191.93	923260.80
(b) Other Federal Operating Expenditures.....	874855.20	1443710.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	992699.18	2587753.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	208826.03	208826.03
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2650.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	2650.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	217546.82	378360.08
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	217546.82	378360.08
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1419072.03	3177589.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1325880.10	2254328.46

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	992220.13	2425695.95
34. Total Contribution Refunds (from Line 28(d))	0.00	2650.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	992220.13	2423045.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	899507.25	1664492.35
37. Offsets to Operating Expenditures (from Line 15, page 3)	7476.05	39947.89
38. Net Operating Expenditures (subtract Line 37 from Line 36)	892031.20	1624544.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 281
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) S. Daniel Abraham	Date of Receipt
	Mailing Address 777 S Flagler Dr East Tower, Suite 1000	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 14 / 2010
	City State Zip Code West Palm Beach FL 33401-6161	Transaction ID: C4780024
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
	Name of Employer Healthy Foods of America (Formerly Sli) Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) Ayme Acosta	Date of Receipt
	Mailing Address 16231 NW 85th Ct	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 28 / 2010
	City State Zip Code Hialeah FL 33016-8504	Transaction ID: C4799437
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00
	Name of Employer Self-employed Occupation Self employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

C.	Full Name (Last, First, Middle Initial) Nelson L. Adams, M.D..	Date of Receipt
	Mailing Address 1098 NE 95th St	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 13 / 2010
	City State Zip Code Miami Shores FL 33138-2548	Transaction ID: C4786174
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
	Name of Employer Access Health Solutions Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7000.00

SUBTOTAL of Receipts This Page (optional)	12500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Piyush C. Agrawal
 Mailing Address 1625 Eagle Bnd
 City State Zip Code
 Weston FL 33327-1615
 Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2010
Transaction ID: C4777992
 Amount of Each Receipt this Period
 10000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Physician
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

B. Full Name (Last, First, Middle Initial)
Maria T. Aral
 Mailing Address 6005 SW 87th Ave
 City State Zip Code
 Miami FL 33173-1621
 Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2010
Transaction ID: C4786165
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ABC Charters Travel Manager
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

C. Full Name (Last, First, Middle Initial)
Bill Barzee
 Mailing Address 608 Majorca Ave
 City State Zip Code
 Coral Gables FL 33134-3753
 Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2010
Transaction ID: C4790986
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-employed Attorney
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

SUBTOTAL of Receipts This Page (optional) ► 20000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 9 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Mailing Address 608 Majorca Ave

City State Zip Code
Coral Gables FL 33134-3753

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

Name of Employer Self Employed Occupation
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: C4804828

Amount of Each Receipt this Period
2000.00

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

Mailing Address 623 N Federal Hwy

City State Zip Code
Pompano Beach FL 33062-4301

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

Name of Employer Self-employed Occupation
Self-employed Student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 827.26

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: C4961301

Amount of Each Receipt this Period
827.26

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

Mailing Address 801 Arthur Godfrey Rd

City State Zip Code
Miami Beach FL 33140-3323

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

Name of Employer Miami Beach Public Schools Occupation
Miami Beach Public Schools Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2010

Transaction ID: C4786179

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **12827.26**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Bridge PAC James E. Clyburn Honorary Chair

Mailing Address 499 S Capitol St SW
Ste 422

City State Zip Code
Washington DC 20003-4028

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: C4799483

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
James Brookins

Mailing Address 6004 Windham Pl

City State Zip Code
Tampa FL 33647-1149

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

Name of Employer Occupation
Access Health Solutions CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: C4799369

Amount of Each Receipt this Period

5000.00

C.

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

Mailing Address 412 Farmers Market Rd

City State Zip Code
Fort Pierce FL 34982-8228

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

Name of Employer Occupation
Self Employed/ St. Lucie DEC Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: C4814082

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

10025.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lorenzo Cabrera

Mailing Address 9008 SW 214th St

City State Zip Code
Cutler Bay FL 33189-3783

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

Name of Employer Occupation
Cabrera Services President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 2 / 2 0 1 0

Transaction ID: C4923475

Amount of Each Receipt this Period

6000.00

B.

Full Name (Last, First, Middle Initial)

Jacques Calixte

Mailing Address 269 NW 7th St
Apt 219

City State Zip Code
Miami FL 33136-3903

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

Name of Employer Occupation
Haitian America Association Executive Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 1 0

Transaction ID: C4780015

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Campaign Account of Marline Bastien

Mailing Address PO Box 381255

City State Zip Code
Miami FL 33238-1255

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: C4772947

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional) ▶

17500.00

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

C. Form/Schedule : **SA11AI**
Transaction ID : **C4772947**

The receipt from Campaign Account of Marline Bastien was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 281
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Robert Carraway

Mailing Address 7250 Spring Mountain Ln

City Yalaha State FL Zip Code 34797-3098

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

Name of Employer University of Massasuchetts Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2010

Transaction ID: C4799450

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Jose Carrillo

Mailing Address 5820 Blue Lagoon Dr Ste 125

City Miami State FL Zip Code 33126-2579

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

Name of Employer Gimenez & Carrillo, LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2010

Transaction ID: C4923474

Amount of Each Receipt this Period
2500.00

C.

Full Name (Last, First, Middle Initial)
Chris Chestnut

Mailing Address 500 E University Ave Ste C

City Gainesville State FL Zip Code 32601-3458

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

Name of Employer The Chestnut Law Firm Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2010

Transaction ID: C4814122

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 281
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Arthur Collins

Mailing Address 3911 Lorcom Ln

City Arlington State VA Zip Code 22207-5129

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

Name of Employer Public Private Partnershi- p, Inc. Occupation Political Strategist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 17 / 2010

Transaction ID: C4923467

Amount of Each Receipt this Period 10000.00

B.

Full Name (Last, First, Middle Initial)
Sara Dassance

Mailing Address 1757 SE 5th St

City Ocala State FL Zip Code 34471-2509

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2010

Transaction ID: C4923518

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Arlen Dominek

Mailing Address 50 East Rd Apt 2G

City Delray Beach State FL Zip Code 33483-7036

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

Name of Employer Peer Consulting Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2025.00

Date of Receipt 09 / 23 / 2010

Transaction ID: C4791020

Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 12250.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Sean Domnick

Mailing Address 5100 Pga Blvd
Ste 317

City State Zip Code
Palm Beach Gardens FL 33418-3956

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

Name of Employer Occupation
Domnick & Shevin PL Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	0

Transaction ID: C4923525

Amount of Each Receipt this Period

7700.00

B.

Full Name (Last, First, Middle Initial)
Sally Katzen Dyk

Mailing Address 4638 30th St NW

City State Zip Code
Washington DC 20008-2127

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

Name of Employer Occupation
george mason law school professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	0

Transaction ID: C4777988

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Michael Dyson

Mailing Address 4411 Connecticut Ave NW
Apt 111

City State Zip Code
Washington DC 20008-2355

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

Name of Employer Occupation
Georgetown Professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Transaction ID: C4786173

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) ▶

17700.00

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

--

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 281
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Yolanda Escollies

Mailing Address 5333 Collins Ave
Apt 1106

City Miami Beach State FL Zip Code 33140-3248

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: C4923485

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Ronald Esserman

Mailing Address 10455 NW 12th St

City Doral State FL Zip Code 33172-2736

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

Name of Employer Self-Employed Occupation Car Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2010

Transaction ID: C4777995

Amount of Each Receipt this Period
4000.00

C.

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

Mailing Address 109 Wells Rd

City Palm Beach State FL Zip Code 33480-3622

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

Name of Employer Florida Crystals Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4923501

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► 14050.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 281
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Cathie Fanjul

Mailing Address 109 Wells Rd

City State Zip Code
Palm Beach FL 33480-3622

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4923468

Amount of Each Receipt this Period
10000.00

B.

Full Name (Last, First, Middle Initial)
Lillian F. Fernandez

Mailing Address 246 Eden Rd

City State Zip Code
Palm Beach FL 33480-3316

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

Name of Employer Self - Employed Occupation Interior Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: C4923494

Amount of Each Receipt this Period
10000.00

C.

Full Name (Last, First, Middle Initial)
Luis Fernandez

Mailing Address 246 Eden Rd

City State Zip Code
Palm Beach FL 33480-3316

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

Name of Employer Flo-Sun Sugar Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: C4923495

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **30000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Rida Friedkin

Mailing Address PO Box 126100

City State Zip Code
Hialeah FL 33012-1601

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

Name of Employer Occupation
Self-employed Self-employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2010

Transaction ID: C4790989

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Steven J. Green

Mailing Address 2601 S Bayshore Dr
FI 9

City State Zip Code
Miami FL 33133-5417

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

Name of Employer Occupation
greenstreet partners managing director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2010

Transaction ID: C4777990

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Bill Heller

Mailing Address 960 Water Lily Ct NE

City State Zip Code
Saint Petersburg FL 33703-3136

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

Name of Employer Occupation
State of Florida State Representative

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 10100.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2010

Transaction ID: C4785922

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

20100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 281
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Bill Heller

Mailing Address 960 Water Lily Ct NE

City State Zip Code
Saint Petersburg FL 33703-3136

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

Name of Employer State of Florida Occupation State Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10100.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: C4785930

Amount of Each Receipt this Period
10000.00

B.

Full Name (Last, First, Middle Initial)
Sally Heyman

Mailing Address 1050 NE 181st St

City State Zip Code
North Miami Beach FL 33162-1220

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

Name of Employer Miami Dade County Commission Occupation County Commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4786164

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Donald Hinkle

Mailing Address 3710 Bobbin Mill Rd

City State Zip Code
Tallahassee FL 32312-1202

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

Name of Employer Hinkle & Foran Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2010

Transaction ID: C4791022

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 16000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Cheryl D Hochberg

Mailing Address 1081 Waterside Ln

City State Zip Code
Hollywood FL 33019-5004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: C4799384

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
I.B.E.W. Educational Committee

Mailing Address 900 7th St NW

City State Zip Code
Washington DC 20001-3886

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt M M / D D / Y Y Y Y
09 / 29 / 2010

Transaction ID: C4804826

Amount of Each Receipt this Period 5000.00

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

Mailing Address 2525 1st St

City State Zip Code
Fort Myers FL 33901-2465

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1943.00

Date of Receipt M M / D D / Y Y Y Y
09 / 22 / 2010

Transaction ID: C4791004

Amount of Each Receipt this Period 1943.00

SUBTOTAL of Receipts This Page (optional) 7193.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **C4804826**

Check number 21214 was received from I.B.E.W.Educational Committee on 9/29/10 by the Democratic Executive Committee of Florida.

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

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

FOR LINE NUMBER: PAGE 22 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Billy Joel

Mailing Address 5600 Island Blvd.

City State Zip Code
Aventura FL 33160

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

Name of Employer Occupation
City of Aventura Comissioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4923470

Amount of Each Receipt this Period
500.00

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

Mailing Address 6627 Butler Oaks Ct

City State Zip Code
Spring TX 77389-2921

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

Name of Employer Occupation
Self-employed Musician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4961855

Amount of Each Receipt this Period
10000.00

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

Mailing Address 4800 Deerwood Campus Pkwy
Dcc3-4

City State Zip Code
Jacksonville FL 32246-6498

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

Name of Employer Occupation
Blue Cross & Blue Shields Vice President of Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: C4777885

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **11500.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Joel Karp

Mailing Address 900 Brickell Key Blvd

City State Zip Code
Miami FL 33131-3742

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

Name of Employer Self-employed Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: C4791025
Amount of Each Receipt this Period: 2500.00

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

Mailing Address 110 Central Park S Apt 5B

City State Zip Code
New York NY 10019-1525

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

Name of Employer JP Morgan Chase Occupation managing director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt: 09 / 30 / 2010
Transaction ID: C4814130
Amount of Each Receipt this Period: 7500.00

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

Mailing Address 10110 Whippoorwill Ln

City State Zip Code
Jacksonville FL 32256-0503

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

Name of Employer Heart & Vessell Care Occupation Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 23 / 2010
Transaction ID: C4795785
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 281
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Deirdre Kyle

Mailing Address 14816 Amelia View Dr

City State Zip Code
Jacksonville FL 32226-4461

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

Name of Employer Self-employed Occupation
Self-employed Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2010

Transaction ID: C4780021

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
Marsha Laufer

Mailing Address 1740 S Ocean Blvd

City State Zip Code
Lantana FL 33462-6222

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

Name of Employer Self-employed Occupation
Self-employed Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2010

Transaction ID: C4789318

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Marsha Laufer

Mailing Address 1740 S Ocean Blvd

City State Zip Code
Lantana FL 33462-6222

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

Name of Employer Self-employed Occupation
Self-employed Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2010

Transaction ID: C4789319

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **12500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Ira H. Leesfield

Mailing Address 2350 S Dixie Hwy

City State Zip Code
Miami FL 33133-2314

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

Name of Employer Occupation
Leesfield, Layton & Rubio Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2010

Transaction ID: C4789323

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
George Lindemann, Jr.

Mailing Address 4500 Biscayne Blvd
Suite 105

City State Zip Code
Miami Beach FL 33140

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

Name of Employer Occupation
B.C. Property Investment Businessman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: C4790996

Amount of Each Receipt this Period
10000.00

C.

Full Name (Last, First, Middle Initial)
Lori Edwards Campaign

Mailing Address PO Box 280

City State Zip Code
Eagle Lake FL 33839-0280

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 09 / 2010

Transaction ID: C4777947

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ▶

16000.00

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

C. Form/Schedule : **SA11AI**
Transaction ID : **C4777947**

The receipt from Lori Edwards Campaign was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market

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

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

FOR LINE NUMBER: PAGE 27 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Norma Gene Lykes
Mailing Address 17 Bahama Cir
City Tampa State FL Zip Code 33606-3317
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5250.00
Date of Receipt MM / DD / YYYY
09 / 22 / 2010
Transaction ID: C4791006
Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
Stephen Marino
Mailing Address 100 SE 2nd St Ste 2150
City Miami State FL Zip Code 33131-2137
FEC ID number of contributing federal political committee. **C**
Name of Employer Ver Ploeg & Lumpkin, P.A. Occupation attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt MM / DD / YYYY
09 / 29 / 2010
Transaction ID: C4799731
Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Daryl Mays
Mailing Address 88 West Traces Ferry Rd #2420
City Atlanta State GA Zip Code 30305
FEC ID number of contributing federal political committee. **C**
Name of Employer NSRO company Occupation President and CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt MM / DD / YYYY
09 / 16 / 2010
Transaction ID: C4790984
Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 15000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Roger Medel

Mailing Address 12923 Grand Oaks Dr

City State Zip Code
Davie FL 33330-5305

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

Name of Employer Occupation
Pediatrix CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 29 / 2010

Transaction ID: C4804827

Amount of Each Receipt this Period
10000.00

B.

Full Name (Last, First, Middle Initial)
Alan Meltzer

Mailing Address 6500 Rock Spring Dr
Ste 500

City State Zip Code
Bethesda MD 20817-1149

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

Name of Employer Occupation
Meltzer Group Insurance Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: C4923545

Amount of Each Receipt this Period
2000.00

C.

Full Name (Last, First, Middle Initial)
Sara Morgan

Mailing Address 2121 Kirby Dr
Unit 99

City State Zip Code
Houston TX 77019-6067

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 01 / 2010

Transaction ID: C4923400

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)

17000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Padro Munilla

Mailing Address 6201 SW 70th St

City State Zip Code
South Miami FL 33143-4718

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

Name of Employer Executive Occupation MCM Corporation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2010

Transaction ID: C4786171

Amount of Each Receipt this Period
5000.00

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

Mailing Address 330 Casuarina Concourse

City State Zip Code
Coral Gables FL 33143-6508

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

Name of Employer Self Occupation Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2010

Transaction ID: C4923472

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Linda F Murphy

Mailing Address 3575 Battersea Rd

City State Zip Code
Miami FL 33133-6802

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

Name of Employer Self Employed Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4786182

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 281
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Merry T O'Donnell

Mailing Address 431 N Lyra Cir

City Juno Beach State FL Zip Code 33408-1901

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

Name of Employer retired Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 17 / 2010

Transaction ID: C4786184

Amount of Each Receipt this Period 3000.00

B.

Full Name (Last, First, Middle Initial)
John P. Ottino, III

Mailing Address 5561 Oakview Ter

City Fort Lauderdale State FL Zip Code 33312-6268

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

Name of Employer The Berkley Group Occupation Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 17 / 2010

Transaction ID: C4786183

Amount of Each Receipt this Period 5000.00

C.

Full Name (Last, First, Middle Initial)
Daryl D. Parks

Mailing Address 240 N Magnolia Dr

City Tallahassee State FL Zip Code 32301-2638

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

Name of Employer Attorney Occupation Parks & Crump LLC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 13 / 2010

Transaction ID: C4786175

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 13000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Daryl Parks

Mailing Address 240 N Magnolia Dr

City State Zip Code
Tallahassee FL 32301-2638

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

Name of Employer Occupation
Parks & Crump, LLC Lawyer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: C4923471

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Ralph B Parrish Jr, Jr

Mailing Address 403 E Park Ave

City State Zip Code
Tallahassee FL 32301-1515

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

Name of Employer Occupation
Ralph B Parrish Jr Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2010

Transaction ID: C4789329

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Zoya Passalacqua

Mailing Address 4211 S Ocean Blvd
Apt 3

City State Zip Code
Highland Beach FL 33487-4243

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

Name of Employer Occupation
Remax realtor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: C4799377

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional) ▶

5000.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Dennis Pastrana

Mailing Address PO Box 352273

City State Zip Code
Miami FL 33135-8273

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

Name of Employer Occupation
Goodwill Industries CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2010

Transaction ID: C4795786

Amount of Each Receipt this Period
5000.00

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

Mailing Address PO Box 551073

City State Zip Code
Ft Lauderdale FL 33355-1073

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

Name of Employer Occupation
Pereda & Associates Corp. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2010

Transaction ID: C4923541

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Prairie Political Action Committee

Mailing Address 53 W Jackson Blvd
Ste 1626

City State Zip Code
Chicago IL 60604-3740

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2010

Transaction ID: C4799477

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **12500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 281
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Toni Randolph

Mailing Address 4814 Fisher Island Dr

City Miami Beach State FL Zip Code 33109-0174

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 13 / 2010

Transaction ID: C4786181

Amount of Each Receipt this Period 2000.00

B.

Full Name (Last, First, Middle Initial)
Kathleen P Ryan

Mailing Address 3468 Anguilla Way

City Naples State FL Zip Code 34119-1615

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 30 / 2010

Transaction ID: C4814079

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
William Sanchez

Mailing Address 698 NW 134th Pl

City Miami State FL Zip Code 33182-1668

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

Name of Employer Self-employed Occupation immigration lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.64

Date of Receipt 09 / 14 / 2010

Transaction ID: C4780044

Amount of Each Receipt this Period 712.64

SUBTOTAL of Receipts This Page (optional) ► 2737.64

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

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

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

FOR LINE NUMBER: PAGE 34 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Gilbert Lee Sandler

Mailing Address 5200 Blue Lagoon Dr

City State Zip Code
Miami FL 33126-7006

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

Name of Employer Sandler, Travis & Rosenberg
Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 09 / 30 / 2010
Transaction ID: C4804829
Amount of Each Receipt this Period: 2400.00

B. Full Name (Last, First, Middle Initial)
Mark P Schnapp

Mailing Address 450 Alton Rd
Apt 2305

City State Zip Code
Miami Beach FL 33139-6765

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

Name of Employer Greenberg Traurig
Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 09 / 28 / 2010
Transaction ID: C4799382
Amount of Each Receipt this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
Seminole Tribe Of Florida

Mailing Address 6300 Stirling Rd

City State Zip Code
Hollywood FL 33024-2153

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

Name of Employer
Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 23 / 2010
Transaction ID: C4795788
Amount of Each Receipt this Period: 10000.00

SUBTOTAL of Receipts This Page (optional) ► 13900.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jerry Sokol

Mailing Address 437 N Hibiscus Dr

City State Zip Code
Miami Beach FL 33139-5125

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

Name of Employer Occupation
mcdermont, will and emery Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 29 / 2010

Transaction ID: C4799739

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey Solomon

Mailing Address 13865 S Dixie Hwy
Ste 307

City State Zip Code
Miami FL 33176-7221

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

Name of Employer Occupation
Self Chiropractor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2010

Transaction ID: C4923482

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Southern Wine And Spirits PAC

Mailing Address 1600 NW 163rd St

City State Zip Code
Miami FL 33169-5641

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 08 / 2010

Transaction ID: C4777991

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Christopher Spock

Mailing Address 10 High Hill Rd

City State Zip Code
Canton CT 06019-2225

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

Name of Employer Occupation
Self-employed Dermatologist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: C4799374

Amount of Each Receipt this Period

400.00

B.

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

Mailing Address 6686 Edenbury lane

City State Zip Code
Miami Beach FL 33141

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: C4777884

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Robin Suarez

Mailing Address 3722 Upper Union Rd

City State Zip Code
Orlando FL 32814-6528

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

Name of Employer Occupation
Attorney atty

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 12 / 2010

Transaction ID: C4923492

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5650.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 37 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Silvia Trujillo
Mailing Address 14201 SW 130th Ave
City Miami State FL Zip Code 33186-8950
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Artist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 09 / 28 / 2010
Transaction ID: C4799438
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Bruce L Udolf, PA
Mailing Address 3351 NW Boca Raton Blvd
City Boca Raton State FL Zip Code 33431-6623
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Attorney
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 09 / 28 / 2010
Transaction ID: C4799375
Amount of Each Receipt this Period 1500.00

C. Full Name (Last, First, Middle Initial)
Ward Wagner Jr
Mailing Address 1753 Flagler Manor Cir
City West Palm Beach State FL Zip Code 33411-5111
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 23 / 2010
Transaction ID: C4923530
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 4250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 281
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Amy Wall-Bobker

Mailing Address 2921 Medinah

City State Zip Code
Weston FL 33332-1849

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

Name of Employer Occupation
Unisa America Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2010

Transaction ID: C4777993

Amount of Each Receipt this Period
10000.00

B. Full Name (Last, First, Middle Initial)
William M. Webster, IV

Mailing Address 184 Mills Ave

City State Zip Code
Spartanburg SC 29302-1940

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

Name of Employer Occupation
Advance America Real Estate Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 24 / 2010

Transaction ID: C4791016

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
Frank White Jr.

Mailing Address 11747 Veirs Mill Rd

City State Zip Code
Silver Spring MD 20902-2449

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

Name of Employer Occupation
Self-employed Self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2010

Transaction ID: C4799486

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional) ► 23000.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Joe R Zednik

Mailing Address 26920 Montego Pointe Ct

City State Zip Code
Bonita Spgs FL 34134-0733

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

Name of Employer Occupation
Lakeshore Trading LLC Retired

Receipt For:
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: C4777883

Amount of Each Receipt this Period
10000.00

Aggregate Year-to-Date ▼
10000.00

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	385732.90

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

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

FOR LINE NUMBER: PAGE 40 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 S Capitol St SE
City Washington State DC Zip Code 20003-4024
FEC ID number of contributing federal political committee. **C** C00000935
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 653332.00
Date of Receipt 09 / 23 / 2010
Transaction ID: C4807066
Amount of Each Receipt this Period 126286.00

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 S Capitol St SE
City Washington State DC Zip Code 20003-4024
FEC ID number of contributing federal political committee. **C** C00000935
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 653332.00
Date of Receipt 09 / 30 / 2010
Transaction ID: C4807060
Amount of Each Receipt this Period 2650.00

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 S Capitol St SE
City Washington State DC Zip Code 20003-4024
FEC ID number of contributing federal political committee. **C** C00000935
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 653332.00
Date of Receipt 09 / 30 / 2010
Transaction ID: C4807063
Amount of Each Receipt this Period 73511.00

SUBTOTAL of Receipts This Page (optional) ► 202447.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 281

(check only one)

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
544743.48

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 01 / 2010

Transaction ID: C4958387

Amount of Each Receipt this Period

6046.84

* In-Kind: Rent & Utilities

B.

Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
544743.48

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 05 / 2010

Transaction ID: C4958367

Amount of Each Receipt this Period

3220.00

* In-Kind: Voter File Access

C.

Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
544743.48

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2010

Transaction ID: C4958391

Amount of Each Receipt this Period

34672.05

* In-Kind: Salary & Benefits

SUBTOTAL of Receipts This Page (optional) ▶

43938.89

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 281
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Washington DC 20003-4024		<input type="text"/> 09 / <input type="text"/> 28 / <input type="text"/> 2010
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/> C00010603		Transaction ID: C4922928
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 325000.00
Aggregate Year-to-Date ▼ <input type="text"/> 544743.48		

B.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 S Capitol St SE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Washington DC 20003-4024		<input type="text"/> 09 / <input type="text"/> 30 / <input type="text"/> 2010
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/> C00010603		Transaction ID: C4958392
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 14517.34
Aggregate Year-to-Date ▼ <input type="text"/> 544743.48		

* In-Kind: Payroll & Benefits

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 339517.34
TOTAL This Period (last page this line number only)	<input type="text"/> 585903.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 281

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Human Rights Campaign PAC - LGBT Advocates

Mailing Address 1640 Rhode Island Ave NW

City State Zip Code
Washington DC 20036-3200

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9402.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 0

Transaction ID: C4802554

Amount of Each Receipt this Period

4402.00

* In-Kind: Salary & Benefits

B.

Full Name (Last, First, Middle Initial)
The NEA Fund for Children & Public Education

Mailing Address 1201 16th St NW
Ste 421

City State Zip Code
Washington DC 20036-3201

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 0

Transaction ID: C4804830

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNI

Mailing Address 1775 K St NW

City State Zip Code
Washington DC 20006-1228

FEC ID number of contributing federal political committee. **C** C70003645

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Transaction ID: C4789327

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) ▶

14402.00

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

14402.00

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

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

FOR LINE NUMBER: PAGE 44 / 281
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Castor For Congress

Mailing Address 301 W Platt St
385

City Tampa State FL Zip Code 33606-2292

FEC ID number of contributing federal political committee. **C** C00410761

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 2 9 / 2 0 1 0

Transaction ID: C4813040

Amount of Each Receipt this Period
30000.00

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653332.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 3 / 2 0 1 0

Transaction ID: C4780085

Amount of Each Receipt this Period
23825.00

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653332.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 5 / 2 0 1 0

Transaction ID: C4780084

Amount of Each Receipt this Period
54070.00

SUBTOTAL of Receipts This Page (optional) ► **107895.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 281
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653332.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4786137

Amount of Each Receipt this Period
30000.00

B.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653332.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: C4786138

Amount of Each Receipt this Period
12457.00

C.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653332.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2010

Transaction ID: C4807062

Amount of Each Receipt this Period
34600.00

SUBTOTAL of Receipts This Page (optional) ► **77057.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 281
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City	State	Zip Code
Washington	DC	20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 544743.48

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2010

Transaction ID: C4777665

Amount of Each Receipt this Period
4924.00

SUBTOTAL of Receipts This Page (optional)	▶	4924.00
TOTAL This Period (last page this line number only)	▶	189876.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 281
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1128.90

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: C4961304

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Payroll Matters

Mailing Address 2069 N Monroe St

City State Zip Code
Tallahassee FL 32303-4727

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
554.12

Date of Receipt
MM / DD / YYYY
09 / 01 / 2010

Transaction ID: C4961306

Amount of Each Receipt this Period
554.12

C.

Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address United States Treasury

City State Zip Code
Austin TX 78714

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37259.86

Date of Receipt
MM / DD / YYYY
09 / 14 / 2010

Transaction ID: C4785918

Amount of Each Receipt this Period
6671.93

SUBTOTAL of Receipts This Page (optional)	▶	7476.05
TOTAL This Period (last page this line number only)	▶	7476.05

C. Form/Schedule : **SA15**
Transaction ID : **C4785918**

Check from United States Treasury was for: F-941 REF, Form 941- Employer's Quarterly Federal Tax Return.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 281
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Capital City Bank

Mailing Address PO Box 1630

City State Zip Code
Tallahassee FL 32302-1630

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1128.90

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2010

Transaction ID: C4961327

Amount of Each Receipt this Period
47.10

SUBTOTAL of Receipts This Page (optional)	▶	47.10
TOTAL This Period (last page this line number only)	▶	47.10

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 281

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

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

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) 241 Car Services, Inc.	Transaction ID: D322871 Date of Disbursement 09 / 08 / 2010
	Mailing Address 5012 W Cypress St	Amount of Each Disbursement this Period 246.00
	City Tampa State FL Zip Code 33607-3804	
	Purpose of Disbursement Auto Travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alafaya Utilities, Inc.	Transaction ID: D322601 Date of Disbursement 09 / 03 / 2010
	Mailing Address PO Box 11025	Amount of Each Disbursement this Period 45.00
	City Lewiston State ME Zip Code 04243-9476	
	Purpose of Disbursement Admin Utilities	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: D328772 Date of Disbursement 09 / 20 / 2010
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 292.29
	City Phoenix State AZ Zip Code 85072-3852	
	Purpose of Disbursement Merchant Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	583.29
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) American Express Merchant Services Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D328794 Date of Disbursement 09 / 01 / 2010
	Amount of Each Disbursement this Period 2726.77

B. Full Name (Last, First, Middle Initial) Alan Awad Mailing Address 13612 Avalon Heights Blvd Apt 204B City Tampa State FL Zip Code 33613-4676 Purpose of Disbursement Phone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322552 Date of Disbursement 09 / 01 / 2010
	Amount of Each Disbursement this Period 65.00

C. Full Name (Last, First, Middle Initial) Alan Awad Mailing Address 13612 Avalon Heights Blvd Apt 204B City Tampa State FL Zip Code 33613-4676 Purpose of Disbursement Phone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324893 Date of Disbursement 09 / 20 / 2010
	Amount of Each Disbursement this Period 65.00

SUBTOTAL of Disbursements This Page (optional) ▶	2856.77
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 52 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Rishi Bagga</p> <p>Mailing Address 3619 Devereaux Ct</p> <p>City Orlando State FL Zip Code 32837-5463</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325041 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Steven Balog</p> <p>Mailing Address 13413 Thomasville Cir</p> <p>City Tampa State FL Zip Code 33617-9344</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324897 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>C. Full Name (Last, First, Middle Initial) Steven Balog</p> <p>Mailing Address 13413 Thomasville Cir</p> <p>City Tampa State FL Zip Code 33617-9344</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322553 Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>

SUBTOTAL of Disbursements This Page (optional)	195.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jason Barnaby	Transaction ID: D322554 Date of Disbursement 09 / 01 / 2010
	Mailing Address 815 McBean Ct	
	City McDonough State GA Zip Code 30252-4162	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Jason Barnaby	Transaction ID: D322587 Date of Disbursement 09 / 02 / 2010
	Mailing Address 815 McBean Ct	
	City McDonough State GA Zip Code 30252-4162	Amount of Each Disbursement this Period 770.65
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Jason Barnaby	Transaction ID: D324890 Date of Disbursement 09 / 20 / 2010
	Mailing Address 815 McBean Ct	
	City McDonough State GA Zip Code 30252-4162	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	900.65
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida</p> <p>Mailing Address PO Box 2210</p> <p>City Jacksonville State FL Zip Code 32203-2210</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322573</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 363.00</p>
<p>B. Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida</p> <p>Mailing Address PO Box 2210</p> <p>City Jacksonville State FL Zip Code 32203-2210</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322574</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 12038.40</p>
<p>C. Full Name (Last, First, Middle Initial) Craig Borkon</p> <p>Mailing Address 8571 Brody Way ---</p> <p>City Boca Raton State FL Zip Code 33433-7647</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325080</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12466.40

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Eric Bornstein</p> <p>Mailing Address 12 Bellevue Ave</p> <p>City Dobbs Ferry State NY Zip Code 10522-2606</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325065 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Bright House Networks</p> <p>Mailing Address PO Box 31337</p> <p>City Tampa State FL Zip Code 33631-3337</p> <p>Purpose of Disbursement Admin Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326034 Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 84.95</p>
<p>C. Full Name (Last, First, Middle Initial) Brighthouse Networks</p> <p>Mailing Address PO Box 31337 10305 NW 41st St., Ste 201</p> <p>City Tampa State FL Zip Code 33631-3337</p> <p>Purpose of Disbursement Admin Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322870 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 138.40</p>

SUBTOTAL of Disbursements This Page (optional)	288.35
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Brighthouse Networks <hr/> Mailing Address PO Box 31337 10305 NW 41st St., Ste 201 <hr/> City Tampa State FL Zip Code 33631-3337 <hr/> Purpose of Disbursement Admin Internet Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323217 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2010
	Amount of Each Disbursement this Period 74.95
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Wilma Brown <hr/> Mailing Address 3817 Bennett Rd <hr/> City Screven State GA Zip Code 31560-9133 <hr/> Purpose of Disbursement Phone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D325067 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2010
	Amount of Each Disbursement this Period 65.00
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) David Browne <hr/> Mailing Address 417 S Paloma Pl <hr/> City Tampa State FL Zip Code 33609-3711 <hr/> Purpose of Disbursement Phone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D325078 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2010
	Amount of Each Disbursement this Period 65.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	204.95
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jordan J Budd	Transaction ID: D332001 Date of Disbursement 09 / 26 / 2010
	Mailing Address 128 Century Dr	Amount of Each Disbursement this Period 100.00
	City Easley State SC Zip Code 29642	
	Purpose of Disbursement Auto Travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333178 Date of Disbursement 09 / 30 / 2010
	Mailing Address PO Box 1630	Amount of Each Disbursement this Period 60.00
	City Tallahassee State FL Zip Code 32302-1630	
	Purpose of Disbursement Merchant Bank Fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333198 Date of Disbursement 09 / 29 / 2010
	Mailing Address PO Box 1630	Amount of Each Disbursement this Period 20.00
	City Tallahassee State FL Zip Code 32302-1630	
	Purpose of Disbursement Merchant Bank Fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	180.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Capital City Bank Mailing Address PO Box 1630 City Tallahassee State FL Zip Code 32302-1630 Purpose of Disbursement Merchant Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D333200 Date of Disbursement 09 / 07 / 2010
	Amount of Each Disbursement this Period 35.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Capital City Bank Mailing Address PO Box 1630 City Tallahassee State FL Zip Code 32302-1630 Purpose of Disbursement Merchant Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D333206 Date of Disbursement 09 / 08 / 2010
	Amount of Each Disbursement this Period 15.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Capital City Bank Mailing Address PO Box 1630 City Tallahassee State FL Zip Code 32302-1630 Purpose of Disbursement Merchant Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D333169 Date of Disbursement 09 / 03 / 2010
	Amount of Each Disbursement this Period 15.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	65.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333170 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="20.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333171 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="20.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333172 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fees	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

70.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333173 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="40.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333174 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capital City Bank	Transaction ID: D333175 Date of Disbursement
	Mailing Address PO Box 1630	<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32302-1630	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Bank Fee	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Capital City Bank</p> <p>Mailing Address PO Box 1630</p> <p>City Tallahassee State FL Zip Code 32302-1630</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333176</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Celltronix</p> <p>Mailing Address 1718 S Orange Blossom Trl</p> <p>City Apopka State FL Zip Code 32703-7745</p> <p>Purpose of Disbursement Admin Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D329922</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="203.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Changing Targets Media</p> <p>Mailing Address 1155 15th St NW Ste 300</p> <p>City Washington State DC Zip Code 20005-2738</p> <p>Purpose of Disbursement Media</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323029</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12223.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 62 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Wei Chen	Transaction ID: D322808 Date of Disbursement 09 / 07 / 2010
	Mailing Address 21200 NE 38th Ave Apt 2703	Amount of Each Disbursement this Period 10000.00
	City Miami State FL Zip Code 33180-3863	
	Purpose of Disbursement Contribution Refund	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) City of Oviedo	Transaction ID: D324909 Date of Disbursement 09 / 21 / 2010
	Mailing Address 400 Alexandria Blvd	Amount of Each Disbursement this Period 26.98
	City Oviedo State FL Zip Code 32765-5514	
	Purpose of Disbursement Admin Utilities	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rugh Cline	Transaction ID: D325040 Date of Disbursement 09 / 21 / 2010
	Mailing Address 7720 Abbott Ave Apt 11	Amount of Each Disbursement this Period 65.00
	City Miami Beach State FL Zip Code 33141-2399	
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10091.98
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ams Communications, Inc.	Transaction ID: D325173 Date of Disbursement 09 / 17 / 2010
	Mailing Address 847 Sansome St FI 2	Amount of Each Disbursement this Period 104000.00
	City San Francisco State CA Zip Code 94111-1529	
	Purpose of Disbursement Media Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: D328799 Date of Disbursement 09 / 16 / 2010
	Mailing Address PO Box 4607	Amount of Each Disbursement this Period 499.40
	City Houston State TX Zip Code 77210-4607	
	Purpose of Disbursement Air Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Continental Airlines	Transaction ID: D328800 Date of Disbursement 09 / 16 / 2010
	Mailing Address PO Box 4607	Amount of Each Disbursement this Period 499.40
	City Houston State TX Zip Code 77210-4607	
	Purpose of Disbursement Air Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

104998.80

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Clifford Davy</p> <p>Mailing Address 5055 Wellington Park Cir Apt C18</p> <p>City Orlando State FL Zip Code 32839-4591</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324900 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Clifford Davy</p> <p>Mailing Address 5055 Wellington Park Cir Apt C18</p> <p>City Orlando State FL Zip Code 32839-4591</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322555 Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 S Capitol St SE</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333017 Date of Disbursement 09 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 3220.00</p> <p>* In-Kind Received</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3350.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 S Capitol St SE</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement Rent & Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333025 Date of Disbursement: 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 6046.84</p> <p>* In-Kind Received</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 S Capitol St SE</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement Salary & Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333026 Date of Disbursement: 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 34672.05</p> <p>* In-Kind Received</p>
<p>C. Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 S Capitol St SE</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement Payroll & Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333027 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 14517.34</p> <p>* In-Kind Received</p>

SUBTOTAL of Disbursements This Page (optional) ▶

55236.23

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Nicholas Denmon</p> <p>Mailing Address 8300 41st Ave N</p> <p>City Saint Petersburg State FL Zip Code 33709-3943</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325069 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) DNC Travel Offset Account</p> <p>Mailing Address 430 S Capitol St SE</p> <p>City Washington State DC Zip Code 20003-4024</p> <p>Purpose of Disbursement VPOTUS Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325035 Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 23700.00</p>
<p>C. Full Name (Last, First, Middle Initial) Elavon Merchant Services</p> <p>Mailing Address 1 Concourse Pkwy NE Ste 300</p> <p>City Atlanta State GA Zip Code 30328-5346</p> <p>Purpose of Disbursement Merchant Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D366669 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 596.30</p>

SUBTOTAL of Disbursements This Page (optional) ▶

24361.30

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Elavon Merchant Services Mailing Address 1 Concourse Pkwy NE Ste 300 City Atlanta State GA Zip Code 30328-5346 Purpose of Disbursement Merchant Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D328795 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 1 0 Amount of Each Disbursement this Period 1278.81
B.	Full Name (Last, First, Middle Initial) Enterprise Rent-A Car Mailing Address 3300 Capital Cir SW City Tallahassee State FL Zip Code 32310-8732 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D325917 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 1 0 Amount of Each Disbursement this Period 629.28
C.	Full Name (Last, First, Middle Initial) Everest National Insurance Company Mailing Address PO Box 917807 City Orlando State FL Zip Code 32891-7807 Purpose of Disbursement Benefits Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322508 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0 Amount of Each Disbursement this Period 272.46

SUBTOTAL of Disbursements This Page (optional) ▶	2180.55
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) David Fifer	Transaction ID: D325072 Date of Disbursement 09 / 21 / 2010
	Mailing Address 2790 Old St Augustine Rd Apt P166	Amount of Each Disbursement this Period 65.00
	City Tallahassee State FL Zip Code 32301-6214	
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Florida Power & Light Company	Transaction ID: D324887 Date of Disbursement 09 / 20 / 2010
	Mailing Address PO Box 25576	Amount of Each Disbursement this Period 159.59
	City Miami State FL Zip Code 33102-5576	
	Purpose of Disbursement Admin Utilities Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Franklin Davis Printing Company	Transaction ID: D325075 Date of Disbursement 09 / 22 / 2010
	Mailing Address PO Box 22362	Amount of Each Disbursement this Period 89.24
	City Tampa State FL Zip Code 33622-2362	
	Purpose of Disbursement Admin Office Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	313.83
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Frederica Wilson fo Congress	Transaction ID: D323025 Date of Disbursement
	Mailing Address 19821 NW 2nd Ave # 354	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Miami State FL Zip Code 33169-3341	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="4000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Miccosukee Indian Gaming	Transaction ID: D322608 Date of Disbursement
	Mailing Address 500 SW 177th Ave	<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Miami State FL Zip Code 33194-2800	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel/Lodging	<input type="text" value="118.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Marcus Garza	Transaction ID: D322556 Date of Disbursement
	Mailing Address 10505 Lake Williams Dr	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Odessa State FL Zip Code 33556-2643	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Expense	<input type="text" value="65.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4183.55"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Marcus Garza	Transaction ID: D324892 Date of Disbursement 09 / 20 / 2010
	Mailing Address 10505 Lake Williams Dr	Amount of Each Disbursement this Period 65.00
	City Odessa State FL Zip Code 33556-2643	
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D331996 Date of Disbursement 09 / 24 / 2010
	Mailing Address 920 E 3rd Ave	Amount of Each Disbursement this Period 50.00
	City New Smyrna Beach State FL Zip Code 32169-3147	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jennifer Greenfield	Transaction ID: D325037 Date of Disbursement 09 / 21 / 2010
	Mailing Address 5047 17th St	Amount of Each Disbursement this Period 65.00
	City Zephyrhills State FL Zip Code 33542-2147	
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

180.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michelle Guerin	Transaction ID: D325081 Date of Disbursement 09 / 21 / 2010
	Mailing Address 8670 Wesleyan Dr Apt 307	Amount of Each Disbursement this Period 65.00
	City Fort Myers State FL Zip Code 33919-5242	
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michelle Guerin	Transaction ID: D322548 Date of Disbursement 09 / 02 / 2010
	Mailing Address 8670 Wesleyan Dr Apt 307	Amount of Each Disbursement this Period 65.00
	City Fort Myers State FL Zip Code 33919-5242	
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hamilton Campaigns	Transaction ID: D322875 Date of Disbursement 09 / 09 / 2010
	Mailing Address 3391 S Fletcher Ave	Amount of Each Disbursement this Period 6750.00
	City Fernandina Beach State FL Zip Code 32034-4307	
	Purpose of Disbursement Consulting/Strategy Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6880.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Hampton Inn Corporate	Transaction ID: D328797 Date of Disbursement 09 / 30 / 2010
	Mailing Address 9336 Civic Center Dr	
	City State Zip Code Beverly Hills CA 90210-3604	Amount of Each Disbursement this Period 39.20
	Purpose of Disbursement Travel/Lodging	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mario Henderson	Transaction ID: D325073 Date of Disbursement 09 / 21 / 2010
	Mailing Address 1348 Imperial Dr	
	City State Zip Code Daytona Beach FL 32117-3810	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Renaissance Austin Hotel	Transaction ID: D324482 Date of Disbursement 09 / 14 / 2010
	Mailing Address 9721 Arboretum Blvd	
	City State Zip Code Austin TX 78759-6316	Amount of Each Disbursement this Period 219.78
	Purpose of Disbursement Travel/Lodging	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	323.98
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Hong Huang	Transaction ID: D322807 Date of Disbursement 09 / 07 / 2010
	Mailing Address 21200 NE 38th Ave Apt 2703	Amount of Each Disbursement this Period 10000.00
	City Miami State FL Zip Code 33180-3863	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Human Rights Campaign PAC - LGBT Advocates	Transaction ID: D325890 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1640 Rhode Island Ave NW	Amount of Each Disbursement this Period 4402.00
	City Washington State DC Zip Code 20036-3200	
	Purpose of Disbursement Salary & Benefits Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

* In-Kind Received

C.	Full Name (Last, First, Middle Initial) Image Plus Graphics, Inc.	Transaction ID: D365673 Date of Disbursement 09 / 17 / 2010
	Mailing Address 1440 NE 31st Street	Amount of Each Disbursement this Period 56160.92
	City North Miami Beach State FL Zip Code 33160	
	Purpose of Disbursement Direct Mail Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	70562.92
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Erin Jensen	Transaction ID: D324891 Date of Disbursement 09 / 20 / 2010
	Mailing Address 517 Belle Isle Ave	
	City Belleair Beach State FL Zip Code 33786-3611	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Erin Jensen	Transaction ID: D322561 Date of Disbursement 09 / 01 / 2010
	Mailing Address 517 Belle Isle Ave	
	City Belleair Beach State FL Zip Code 33786-3611	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kester Brothers Reality	Transaction ID: D325550 Date of Disbursement 09 / 24 / 2010
	Mailing Address 615 E Atlantic Blvd	
	City Pompano Beach State FL Zip Code 33060-6343	Amount of Each Disbursement this Period 1200.00
	Purpose of Disbursement Admin Lease/Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1330.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) LAP PProduction, LLC</p> <p>Mailing Address 7040 Seminole Pratt Whitney Rd</p> <p>City Loxahatchee State FL Zip Code 33470-5714</p> <p>Purpose of Disbursement Event Photography</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325494 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 11085.00</p>
<p>B. Full Name (Last, First, Middle Initial) Clotilde Luce</p> <p>Mailing Address 301 Ocean Dr Apt 508</p> <p>City Miami Beach State FL Zip Code 33139-6937</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324464 Date of Disbursement 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p>C. Full Name (Last, First, Middle Initial) Main Street Communications</p> <p>Mailing Address 1300 NE 94th St</p> <p>City Miami Shores State FL Zip Code 33138-2902</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333728 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 90.00</p>

SUBTOTAL of Disbursements This Page (optional)	11375.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SB21B**
Transaction ID : **D325494**

Payments made to LAP Productions for Event Photography were made on behalf of the Party and were for no specific federal candidates.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Main Street Communications</p> <p>Mailing Address 1300 NE 94th St</p> <p>City Miami Shores State FL Zip Code 33138-2902</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333729</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Nicholas Michalik</p> <p>Mailing Address 9452 Laura Anne Dr</p> <p>City Seminole State FL Zip Code 33776-1600</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325046</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="65.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mission Control</p> <p>Mailing Address 114 Mansfield Hollow Rd # A</p> <p>City Mansfield Center State CT Zip Code 06250-1316</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322349</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8100.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Mission Control</p> <p>Mailing Address 114 Mansfield Hollow Rd # A</p> <p>City Mansfield Center State CT Zip Code 06250-1316</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323298 Date of Disbursement: 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 73412.60</p>
<p>B. Full Name (Last, First, Middle Initial) Murphy Putnam Media, Inc.</p> <p>Mailing Address 901 N Washington St Ste 500</p> <p>City Alexandria State VA Zip Code 22314-1535</p> <p>Purpose of Disbursement Media</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325676 Date of Disbursement: 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 266313.00</p>
<p>C. Full Name (Last, First, Middle Initial) Reuben Neff</p> <p>Mailing Address 2010 E Palm Ave Apt 14322</p> <p>City Tampa State FL Zip Code 33605-3934</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325045 Date of Disbursement: 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

339790.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Nesbitt Research	Transaction ID: D323216 Date of Disbursement
	Mailing Address 2120 L St NW Ste 305	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20037-1563	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting/Research	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nesbitt Research	Transaction ID: D322872 Date of Disbursement
	Mailing Address 2120 L St NW Ste 305	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20037-1563	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting/Research	<input type="text" value="2599.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) New Partners Consulting, Inc.	Transaction ID: D322579 Date of Disbursement
	Mailing Address 401 9th St NW Ste 725	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20004-2176	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting/Fundraising	<input type="text" value="19580.72"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="24680.67"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

C. Form/Schedule : **SB21B**
Transaction ID : **D322579**

Payments made to New Partners Consulting for Consulting/Fundraising were made on behalf of the Party and were for no specific federal candidates.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Kerry Nicholson</p> <p>Mailing Address 3252 Sawgrass Creek Cir</p> <p>City Saint Cloud State FL Zip Code 34772-7941</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325043</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Office Depot-Corporate</p> <p>Mailing Address PO Box 633211</p> <p>City Cincinnati State OH Zip Code 45263-3211</p> <p>Purpose of Disbursement Admin Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325915</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1053.75</p>
<p>C. Full Name (Last, First, Middle Initial) Office Depot-Corporate</p> <p>Mailing Address PO Box 633211</p> <p>City Cincinnati State OH Zip Code 45263-3211</p> <p>Purpose of Disbursement Admin Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325916</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 61.87</p>

SUBTOTAL of Disbursements This Page (optional)	1180.62
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Bernadette Ohran	Transaction ID: D324895 Date of Disbursement 09 / 20 / 2010
	Mailing Address 155 55th Ave NE	
	City Saint Petersburg State FL Zip Code 33703-3011	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brenadette Ohran	Transaction ID: D322557 Date of Disbursement 09 / 01 / 2010
	Mailing Address 155 55th Ave NE	
	City Saint Petersburg State FL Zip Code 33703-3011	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mary Anne Oldham	Transaction ID: D322874 Date of Disbursement 09 / 09 / 2010
	Mailing Address 3009 1/2 W Barcelona St Apt 2	
	City Tampa State FL Zip Code 33629-7252	Amount of Each Disbursement this Period 1247.95
	Purpose of Disbursement Lease/Rent Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1377.95
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Mary Anne Oldham	Transaction ID: D326036 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3009 1/2 W Barcelona St Apt 2	Amount of Each Disbursement this Period 963.00
	City Tampa State FL Zip Code 33629-7252	
	Purpose of Disbursement Lease/Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Anthony Parets	Transaction ID: D325079 Date of Disbursement 09 / 21 / 2010
	Mailing Address 3607 Eagle Nest Ct	Amount of Each Disbursement this Period 65.00
	City Melbourne State FL Zip Code 32904-9515	
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anthony Parets	Transaction ID: D322550 Date of Disbursement 09 / 02 / 2010
	Mailing Address 3607 Eagle Nest Ct	Amount of Each Disbursement this Period 65.00
	City Melbourne State FL Zip Code 32904-9515	
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1093.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322829 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 7.50</p>
<p>B. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322809 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 7.50</p>
<p>C. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D333840 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1095.52</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1110.52

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D333841 Date of Disbursement
	Mailing Address 2069 N Monroe St	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Fee	<input type="text" value="30.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D364048 Date of Disbursement
	Mailing Address 2069 N Monroe St	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Fees	<input type="text" value="94.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D364091 Date of Disbursement
	Mailing Address 2069 N Monroe St	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Fees	<input type="text" value="100.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="224.75"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364092 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 113.75</p>
<p>B. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364093 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 136.00</p>
<p>C. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365690 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 227.54</p>

SUBTOTAL of Disbursements This Page (optional) ▶

477.29

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365587 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 217.00</p>
<p>B. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365588 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 501.62</p>
<p>C. Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D365589 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 13163.74</p>

SUBTOTAL of Disbursements This Page (optional) ▶

13882.36

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D328499 Date of Disbursement
	Mailing Address 2069 N Monroe St	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Tax	<input type="text" value="29869.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D328516 Date of Disbursement
	Mailing Address 2069 N Monroe St	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Tax	<input type="text" value="21927.72"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Elena Petrescu	Transaction ID: D325071 Date of Disbursement
	Mailing Address 13196 Brechner St	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Spring Hill State FL Zip Code 34609-1216	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Expense	<input type="text" value="65.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="51862.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) PGA Commons, LLC	Transaction ID: D325545 Date of Disbursement 09 / 27 / 2010
	Mailing Address 5520 Pga Blvd PGA PRCL 1 Retail Bldg 1	Amount of Each Disbursement this Period 2848.42
	City Palm Beach Gardens State FL Zip Code 33418-3981	
	Purpose of Disbursement Admin Lease/Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PGA Commons, LLC	Transaction ID: D333177 Date of Disbursement 09 / 24 / 2010
	Mailing Address 5520 Pga Blvd PGA PRCL 1 Retail Bldg 1	Amount of Each Disbursement this Period 1424.21
	City Palm Beach Gardens State FL Zip Code 33418-3981	
	Purpose of Disbursement Admin Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joseph J Pierce	Transaction ID: D365752 Date of Disbursement 09 / 21 / 2010
	Mailing Address 2656 S Scenic Hwy	Amount of Each Disbursement this Period 65.00
	City Lake Wales State FL Zip Code 33898-7409	
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4337.63
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Principal Financial Group	Transaction ID: D324759 Date of Disbursement
	Mailing Address PO Box 14416 Dept. 900	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Des Moines State IA Zip Code 50306-3416	Amount of Each Disbursement this Period
	Purpose of Disbursement Benefits	<input type="text" value="79.74"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Principal Financial Group	Transaction ID: D324761 Date of Disbursement
	Mailing Address PO Box 14416 Dept. 900	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City Des Moines State IA Zip Code 50306-3416	Amount of Each Disbursement this Period
	Purpose of Disbursement Benefits	<input type="text" value="398.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Progress Energy Florida	Transaction ID: D324908 Date of Disbursement
	Mailing Address PO Box 33199	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Saint Petersburg State FL Zip Code 33733-8199	Amount of Each Disbursement this Period
	Purpose of Disbursement Admin Utilities	<input type="text" value="297.02"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="775.46"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Margaret Ramirez</p> <p>Mailing Address 13671 SW 38th Avenue Rd</p> <p>City Ocala State FL Zip Code 34473-2105</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324898 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Residence Inn Marriott-Corporate</p> <p>Mailing Address 2120 P St NW</p> <p>City Washington State DC Zip Code 20037-1009</p> <p>Purpose of Disbursement Travel/Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325925 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 496.21</p>
<p>C. Full Name (Last, First, Middle Initial) Edgar Rincon</p> <p>Mailing Address 225 SW 159th Way</p> <p>City Sunrise State FL Zip Code 33326-2274</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324903 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

626.21

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Edith Robles	Transaction ID: D325076 Date of Disbursement 09 / 21 / 2010
	Mailing Address 305 Bullard St	Amount of Each Disbursement this Period 65.00
	City Fairfield State CT Zip Code 06825-3719	
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joshua Romero	Transaction ID: D325066 Date of Disbursement 09 / 21 / 2010
	Mailing Address 2302 Simpson Ridge Cir Apt C	Amount of Each Disbursement this Period 65.00
	City Kissimmee State FL Zip Code 34744-4487	
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joshua Romero	Transaction ID: D322551 Date of Disbursement 09 / 02 / 2010
	Mailing Address 2302 Simpson Ridge Cir Apt C	Amount of Each Disbursement this Period 65.00
	City Kissimmee State FL Zip Code 34744-4487	
	Purpose of Disbursement Phone Expense Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

195.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jean Roseme	Transaction ID: D322549 Date of Disbursement 09 / 02 / 2010
	Mailing Address 101 NE 31st St	
	City Pompano Beach State FL Zip Code 33064-3645	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jean Roseme	Transaction ID: D325070 Date of Disbursement 09 / 21 / 2010
	Mailing Address 101 NE 31st St	
	City Pompano Beach State FL Zip Code 33064-3645	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Royal Performance Group	Transaction ID: D325162 Date of Disbursement 09 / 20 / 2010
	Mailing Address 2100 Western Ave Ste 80	
	City Lisle State IL Zip Code 60532-1971	Amount of Each Disbursement this Period 1017.50
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ► 1147.50

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Royal Performace Group</p> <p>Mailing Address 2100 Western Ave Ste 80</p> <p>City Lisle State IL Zip Code 60532-1971</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364359</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 24.50</p>
<p>B. Full Name (Last, First, Middle Initial) Marian Sanders</p> <p>Mailing Address 3755 Dairy Rd</p> <p>City Titusville State FL Zip Code 32796-4210</p> <p>Purpose of Disbursement Admin Lease/Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322582</p> <p>Date of Disbursement 09 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 460.04</p>
<p>C. Full Name (Last, First, Middle Initial) Gabriel Sebag</p> <p>Mailing Address 635 Stillview Cir</p> <p>City Brandon State FL Zip Code 33510-2124</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325082</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

549.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Philip Shaw</p> <p>Mailing Address 24 Coventry Ct</p> <p>City Kissimmee State FL Zip Code 34758-2940</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325042 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Vito D Sheeley</p> <p>Mailing Address 2111 Almeria Way S</p> <p>City Saint Petersburg State FL Zip Code 33712-4418</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325038 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>C. Full Name (Last, First, Middle Initial) SKD Knickerbocker</p> <p>Mailing Address 1818 N St NW Ste 450</p> <p>City Washington State DC Zip Code 20036-2473</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325675 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 19988.64</p>

SUBTOTAL of Disbursements This Page (optional) ▶

20118.64

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Jacob Smith</p> <p>Mailing Address 2121 Intracoastal Dr</p> <p>City Fort Lauderdale State FL Zip Code 33305-3637</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324894 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) Jacob Smith</p> <p>Mailing Address 2121 Intracoastal Dr</p> <p>City Fort Lauderdale State FL Zip Code 33305-3637</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322558 Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mildred O. Smith</p> <p>Mailing Address 3550 Esplanade Way Apt 8107</p> <p>City Tallahassee State FL Zip Code 32311-3755</p> <p>Purpose of Disbursement Travel/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323499 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1630.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: D325924 Date of Disbursement
	Mailing Address 2425 Wyman St	<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Dallas State TX Zip Code 75235-2501	Amount of Each Disbursement this Period
	Purpose of Disbursement Air Travel	<input type="text" value="660.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Conrad Stormam	Transaction ID: D323461 Date of Disbursement
	Mailing Address 2625 SW 75th St Apt 1331	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Gainesville State FL Zip Code 32608-8351	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary	<input type="text" value="1625.86"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Omar Syed	Transaction ID: D322559 Date of Disbursement
	Mailing Address 13538 Lake Magdalene Dr	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Tampa State FL Zip Code 33613-4130	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Expense	<input type="text" value="65.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2350.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Omar Syed	Transaction ID: D324896 Date of Disbursement 09 / 20 / 2010
	Mailing Address 13538 Lake Magdalene Dr	Amount of Each Disbursement this Period 65.00
	City Tampa State FL Zip Code 33613-4130	
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joseph Szerejko	Transaction ID: D325064 Date of Disbursement 09 / 21 / 2010
	Mailing Address 15 Thicket Ln	Amount of Each Disbursement this Period 65.00
	City West Hartford State CT Zip Code 06107-1320	
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) The Bahia Mar Beach Resort	Transaction ID: D328798 Date of Disbursement 09 / 17 / 2010
	Mailing Address 801 Seabreeze Blvd	Amount of Each Disbursement this Period 374.07
	City Fort Lauderdale State FL Zip Code 33316-1629	
	Purpose of Disbursement Travel/Lodging	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	504.07
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) The Bahia Mar Beach Resort</p> <p>Mailing Address 801 Seabreeze Blvd</p> <p>City Fort Lauderdale State FL Zip Code 33316-1629</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D328531</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="93.28"/></p>
<p>B. Full Name (Last, First, Middle Initial) The Tyson Organization</p> <p>Mailing Address 855 Texas St</p> <p>City Fort Worth State TX Zip Code 76102-4572</p> <p>Purpose of Disbursement Telephone Calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323215</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) The Warren Harding, LLC</p> <p>Mailing Address 212 S Beach St Ste 110</p> <p>City Daytona Beach State FL Zip Code 32114-4404</p> <p>Purpose of Disbursement Admin Lease/Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322877</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2097.50"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa	Transaction ID: D322589
	Mailing Address 3555 S Ocean Dr	Date of Disbursement MM / DD / YYYY 09 / 02 / 2010
	City Hollywood State FL Zip Code 33019-2827	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement Site Rental	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa	Transaction ID: D325918
	Mailing Address 3555 S Ocean Dr	Date of Disbursement MM / DD / YYYY 09 / 20 / 2010
	City Hollywood State FL Zip Code 33019-2827	Amount of Each Disbursement this Period 794.76
	Purpose of Disbursement Travel/Lodging	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa	Transaction ID: D325919
	Mailing Address 3555 S Ocean Dr	Date of Disbursement MM / DD / YYYY 09 / 27 / 2010
	City Hollywood State FL Zip Code 33019-2827	Amount of Each Disbursement this Period 126.04
	Purpose of Disbursement Travel/Meals	Category/Type
	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:	

SUBTOTAL of Disbursements This Page (optional)	10920.80
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa <hr/> Mailing Address 3555 S Ocean Dr <hr/> City Hollywood State FL Zip Code 33019-2827 <hr/> Purpose of Disbursement Travel/Lodging Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D325920 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 198.69
B.	Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa <hr/> Mailing Address 3555 S Ocean Dr <hr/> City Hollywood State FL Zip Code 33019-2827 <hr/> Purpose of Disbursement Travel/Lodging Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D325921 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 198.69
C.	Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa <hr/> Mailing Address 3555 S Ocean Dr <hr/> City Hollywood State FL Zip Code 33019-2827 <hr/> Purpose of Disbursement Travel/Lodging Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D325922 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 198.69

SUBTOTAL of Disbursements This Page (optional) ▶

596.07

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa</p> <p>Mailing Address 3555 S Ocean Dr</p> <p>City Hollywood State FL Zip Code 33019-2827</p> <p>Purpose of Disbursement Travel/Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325923</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 397.38</p>
<p>B. Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa</p> <p>Mailing Address 3555 S Ocean Dr</p> <p>City Hollywood State FL Zip Code 33019-2827</p> <p>Purpose of Disbursement Travel/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D328796</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 16.53</p>
<p>C. Full Name (Last, First, Middle Initial) Adam Unger</p> <p>Mailing Address 2309 Old Bainbridge Rd # 101 C</p> <p>City Tallahassee State FL Zip Code 32303-3805</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325077</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

478.91

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Adam Unger</p> <p>Mailing Address 2309 Old Bainbridge Rd # 101 C</p> <p>City Tallahassee State FL Zip Code 32303-3805</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322811</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="923.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 4000 E Sky Harbor Blvd</p> <p>City Phoenix State AZ Zip Code 85034-3802</p> <p>Purpose of Disbursement Air Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D328526</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="268.40"/></p>
<p>C. Full Name (Last, First, Middle Initial) Weetompain Inc</p> <p>Mailing Address 2350 Phillips Rd 9202</p> <p>City Tallahassee State FL Zip Code 32308-5592</p> <p>Purpose of Disbursement Media</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326054</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22529.54"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="23721.44"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Weetompain Inc	Transaction ID: D324870
	Mailing Address 2350 Phillips Rd 9202	Date of Disbursement MM / DD / YYYY 09 / 22 / 2010
	City Tallahassee State FL Zip Code 32308-5592	Amount of Each Disbursement this Period 11701.99
	Purpose of Disbursement Media	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) James Wheeler	Transaction ID: D324901
	Mailing Address 2418 Teresa Cir Apt D	Date of Disbursement MM / DD / YYYY 09 / 20 / 2010
	City Tampa State FL Zip Code 33629-6148	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jennifer Whitcomb	Transaction ID: D324899
	Mailing Address 710 13th Ave S	Date of Disbursement MM / DD / YYYY 09 / 20 / 2010
	City Jacksonville Beach State FL Zip Code 32250-5032	Amount of Each Disbursement this Period 65.00
	Purpose of Disbursement Phone Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	11831.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Jennifer Whitcomb</p> <p>Mailing Address 710 13th Ave S</p> <p>City Jacksonville Beach State FL Zip Code 32250-5032</p> <p>Purpose of Disbursement Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322560 Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 65.00</p>
<p>B. Full Name (Last, First, Middle Initial) WRI-TC</p> <p>Mailing Address 2720 E Colonial Dr</p> <p>City Orlando State FL Zip Code 32803-5025</p> <p>Purpose of Disbursement Admin Lease/Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322905 Date of Disbursement 09 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1076.67</p>
<p>C. Full Name (Last, First, Middle Initial) Alan Awad</p> <p>Mailing Address 13612 Avalon Heights Blvd Apt 204B</p> <p>City Tampa State FL Zip Code 33613-4676</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364340 Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 75.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1141.67

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Steven Balog</p> <p>Mailing Address 13413 Thomasville Cir</p> <p>City Tampa State FL Zip Code 33617-9344</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364342 Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 190.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) James Cornille</p> <p>Mailing Address 1301 S Flagler Dr</p> <p>City West Palm Beach State FL Zip Code 33401-6719</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364316 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Clifford Davy</p> <p>Mailing Address 5055 Wellington Park Cir Apt C18</p> <p>City Orlando State FL Zip Code 32839-4591</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364334 Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 195.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Nicholas Denmon</p> <p>Mailing Address 8300 41st Ave N</p> <p>City Saint Petersburg State FL Zip Code 33709-3943</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364325</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Nicholas Denmon</p> <p>Mailing Address 8300 41st Ave N</p> <p>City Saint Petersburg State FL Zip Code 33709-3943</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364326</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Erin Jensen</p> <p>Mailing Address 517 Belle Isle Ave</p> <p>City Belleair Beach State FL Zip Code 33786-3611</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364313</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="310.00"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Anthony Nagatani	Transaction ID: D364332 Date of Disbursement 09 / 22 / 2010
	Mailing Address 1300 Elizabeth Ave Apt 15	Amount of Each Disbursement this Period 225.00
	City Las Vegas State NV Zip Code 89119-6449	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brenadette Ohran	Transaction ID: D364314 Date of Disbursement 09 / 10 / 2010
	Mailing Address 155 55th Ave NE	Amount of Each Disbursement this Period 215.00
	City Saint Petersburg State FL Zip Code 33703-3011	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brenadette Ohran	Transaction ID: D364315 Date of Disbursement 09 / 29 / 2010
	Mailing Address 155 55th Ave NE	Amount of Each Disbursement this Period 285.00
	City Saint Petersburg State FL Zip Code 33703-3011	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Edith Robles	Transaction ID: D364329 Date of Disbursement 09 / 30 / 2010
	Mailing Address 305 Bullard St	
	City Fairfield State CT Zip Code 06825-3719	Amount of Each Disbursement this Period 195.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Edith Robles	Transaction ID: D364330 Date of Disbursement 09 / 15 / 2010
	Mailing Address 305 Bullard St	
	City Fairfield State CT Zip Code 06825-3719	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Joshua Romero	Transaction ID: D364338 Date of Disbursement 09 / 22 / 2010
	Mailing Address 2302 Simpson Ridge Cir Apt C	
	City Kissimmee State FL Zip Code 34744-4487	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Jean Roseme</p> <p>Mailing Address 101 NE 31st St</p> <p>City Pompano Beach State FL Zip Code 33064-3645</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364339</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="180.00"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Gabriel Sebag</p> <p>Mailing Address 635 Stillview Cir</p> <p>City Brandon State FL Zip Code 33510-2124</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364328</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="300.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Vito D Sheeley</p> <p>Mailing Address 2111 Almeria Way S</p> <p>City Saint Petersburg State FL Zip Code 33712-4418</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364331</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="225.00"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Jacob Smith</p> <p>Mailing Address 2121 Intracoastal Dr</p> <p>City Fort Lauderdale State FL Zip Code 33305-3637</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364333 Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 180.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Adam Unger</p> <p>Mailing Address 2309 Old Bainbridge Rd # 101 C</p> <p>City Tallahassee State FL Zip Code 32303-3805</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364337 Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) James Wheeler</p> <p>Mailing Address 2418 Teresa Cir Apt D</p> <p>City Tampa State FL Zip Code 33629-6148</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364335 Date of Disbursement 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sabrina Diz	Transaction ID: D322316 Date of Disbursement 09 / 01 / 2010
	Mailing Address 142 SE 9th Ct	
	City Hialeah State FL Zip Code 33010-5531	Amount of Each Disbursement this Period 355.94
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D322317 Date of Disbursement 09 / 01 / 2010
	Mailing Address PO Box 538695	
	City Atlanta State GA Zip Code 30353-8695	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Citgo - Corporate	Transaction ID: D322319 Date of Disbursement 09 / 01 / 2010
	Mailing Address 1293 Eldridge Pkwy	
	City Houston State TX Zip Code 77077-1670	Amount of Each Disbursement this Period 87.17
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	355.94
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Florida's Turnpike	Transaction ID: D322318 Date of Disbursement 09 / 01 / 2010
	Mailing Address Turnpike Mile Post 263 Bldg. 5315	Amount of Each Disbursement this Period 16.50
	City Ocoee State FL Zip Code 34761	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Shell Gas - Corporate	Transaction ID: D322320 Date of Disbursement 09 / 01 / 2010
	Mailing Address PO Box 2463	Amount of Each Disbursement this Period 152.27
	City Houston State TX Zip Code 77252-2463	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Esther Arregui	Transaction ID: D322592 Date of Disbursement 09 / 01 / 2010
	Mailing Address 902 Lisbon St	Amount of Each Disbursement this Period 58.49
	City Coral Gables State FL Zip Code 33134-2240	
	Purpose of Disbursement Staff Reimbursement	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	58.49
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Shell Gas - Corporate Mailing Address PO Box 2463 City Houston State TX Zip Code 77252-2463 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D322593 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2010
	Amount of Each Disbursement this Period 58.49 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Ashley Walker Mailing Address 1007 N Federal Hwy 1010 Seminole Dr., #1001 City Ft Lauderdale State FL Zip Code 33304-1422 Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D322873 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010
	Amount of Each Disbursement this Period 2227.35 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Amazon.Com Mailing Address 1200 12th Ave S City Seattle State WA Zip Code 98144-2712 Purpose of Disbursement Admin Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D372698 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010
	Amount of Each Disbursement this Period 976.89 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2227.35

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Dominos	Transaction ID: D372702
	Mailing Address 2030 E Fletcher Ave	Date of Disbursement 09 / 09 / 2010
	City Tampa State FL Zip Code 33612-3708	Amount of Each Disbursement this Period 77.15
	Purpose of Disbursement Staff Lunch Meeting	[MEMO ITEM]
	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:	

B.	Full Name (Last, First, Middle Initial) Hotels.com	Transaction ID: D372703
	Mailing Address 2500 Pennsylvania Ave NW	Date of Disbursement 09 / 09 / 2010
	City Washington State DC Zip Code 20037-1611	Amount of Each Disbursement this Period 85.80
	Purpose of Disbursement Travel/Lodging	[MEMO ITEM]
	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:	

C.	Full Name (Last, First, Middle Initial) Marti Maceo	Transaction ID: D372699
	Mailing Address 1226 E 7th Ave	Date of Disbursement 09 / 09 / 2010
	City Tampa State FL Zip Code 33605-3518	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Lease/Rent	[MEMO ITEM]
	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:	

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Office Depot-Corporate</p> <p>Mailing Address PO Box 633211</p> <p>City Cincinnati State OH Zip Code 45263-3211</p> <p>Purpose of Disbursement Admin Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372697 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 678.86</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Seven One Seven Parking Service, Inc.</p> <p>Mailing Address 1410 N Florida Ave</p> <p>City Tampa State FL Zip Code 33602-2612</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372706 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Subway - Corporate</p> <p>Mailing Address 325 Bic Dr</p> <p>City Milford State CT Zip Code 06461-3072</p> <p>Purpose of Disbursement Lunch Meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372700 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 107.00</p> <p>[MEMO ITEM]</p>

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Sweetbay Supermarket</p> <p>Mailing Address 3801 Sugar Palm Dr</p> <p>City Tampa State FL Zip Code 33619-8301</p> <p>Purpose of Disbursement Admin Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372701</p> <p>Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 48.78</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Taxi Service</p> <p>Mailing Address 3675 NW 36th St</p> <p>City Miami State FL Zip Code 33142-4913</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372705</p> <p>Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 38.87</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Walgreens</p> <p>Mailing Address 1845 Alton Rd</p> <p>City Miami Beach State FL Zip Code 33139-1504</p> <p>Purpose of Disbursement Admin Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372704</p> <p>Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 9.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) John Brushwood Mailing Address 3009 W Barcelona St City Tampa State FL Zip Code 33629-7201 Purpose of Disbursement Office Supply Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322876 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010 Amount of Each Disbursement this Period 61.92
B.	Full Name (Last, First, Middle Initial) Office Depot-Corporate Mailing Address PO Box 633211 City Cincinnati State OH Zip Code 45263-3211 Purpose of Disbursement Admin Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D372666 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010 Amount of Each Disbursement this Period 61.92 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Matthew Wilson Mailing Address 5760 Braveheart Way City Tallahassee State FL Zip Code 32317-9409 Purpose of Disbursement Staff Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322906 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2010 Amount of Each Disbursement this Period 91.58

SUBTOTAL of Disbursements This Page (optional) ▶	153.50
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Matthew Wilson <hr/> Mailing Address 5760 Braveheart Way <hr/> City Tallahassee State FL Zip Code 32317-9409 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322907 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2010 <hr/> Amount of Each Disbursement this Period 91.58 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Lucas P Barks <hr/> Mailing Address 71 Gray Rd <hr/> City Gorham State ME Zip Code 04038-1110 <hr/> Purpose of Disbursement Staff Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322908 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 216.00 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Shell Gas - Corporate <hr/> Mailing Address PO Box 2463 <hr/> City Houston State TX Zip Code 77252-2463 <hr/> Purpose of Disbursement Auto Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322909 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 89.00 <hr/> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	216.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Sunpass</p> <p>Mailing Address 605 Suwannee St</p> <p>City Tallahassee State FL Zip Code 32399-3601</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322911</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>27.00</td> </tr> </table> </p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	9		2	0	1	0	27.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	9		2	0	1	0													
27.00																						
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Admin Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322910</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> </p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	9		2	0	1	0	100.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	9		2	0	1	0													
100.00																						
<p>C. Full Name (Last, First, Middle Initial) Ricardo Junquera</p> <p>Mailing Address 10041 SW 48th St</p> <p>City Miami State FL Zip Code 33165-6379</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322934</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>210.01</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	9		2	0	1	0	210.01
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	9		2	0	1	0													
210.01																						

SUBTOTAL of Disbursements This Page (optional) ▶

210.01

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Shell Gas - Corporate Mailing Address PO Box 2463 City Houston State TX Zip Code 77252-2463 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322935 Date of Disbursement 09 / 09 / 2010 Amount of Each Disbursement this Period 210.01 [MEMO ITEM]
	Category/Type	

B. Full Name (Last, First, Middle Initial) Kevin Chambliss Mailing Address 746 N Annie Glidden Rd Apt 404 City Dekalb State IL Zip Code 60115-2130 Purpose of Disbursement Staff Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322936 Date of Disbursement 09 / 09 / 2010 Amount of Each Disbursement this Period 252.00
	Category/Type	

C. Full Name (Last, First, Middle Initial) Chevron Mailing Address 501 El Camino Real City Millbrae State CA Zip Code 94030-2030 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322938 Date of Disbursement 09 / 09 / 2010 Amount of Each Disbursement this Period 152.00 [MEMO ITEM]
	Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶

252.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 122 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Virgin Mobile	Transaction ID: D322937 Date of Disbursement 09 / 09 / 2010
	Mailing Address 100 E Magnolia Dr	Amount of Each Disbursement this Period 100.00
	City Tallahassee State FL Zip Code 32301-5567	
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Sabrina Diz	Transaction ID: D322939 Date of Disbursement 09 / 09 / 2010
	Mailing Address 142 SE 9th Ct	Amount of Each Disbursement this Period 235.77
	City Hialeah State FL Zip Code 33010-5531	
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mobil Gas	Transaction ID: D322941 Date of Disbursement 09 / 09 / 2010
	Mailing Address 4705 W Lake Mary Blvd	Amount of Each Disbursement this Period 135.77
	City Lake Mary State FL Zip Code 32746-4305	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	235.77
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
T-Mobile

Mailing Address PO Box 742596

City Cincinnati State OH Zip Code 45274-2596

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: D322940
Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Gaston Araoz

Mailing Address 1505 Crystal Dr Apt 504

City Arlington State VA Zip Code 22202-4117

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: D322942
Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

123.99

C.

Full Name (Last, First, Middle Initial)
Shell Gas - Corporate

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: D322944
Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

52.89

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

123.99

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 124 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D322943 Date of Disbursement 09 / 09 / 2010
	Mailing Address 6450 Sprint Pkwy	Amount of Each Disbursement this Period 71.10
	City Overland Park State KS Zip Code 66251-6105	
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) John Estes	Transaction ID: D322945 Date of Disbursement 09 / 09 / 2010
	Mailing Address 9884 SW 26th Ter	Amount of Each Disbursement this Period 203.22
	City Miami State FL Zip Code 33165-2627	
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Shell Gas - Corporate	Transaction ID: D322947 Date of Disbursement 09 / 09 / 2010
	Mailing Address PO Box 2463	Amount of Each Disbursement this Period 138.57
	City Houston State TX Zip Code 77252-2463	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	203.22
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D322946 Date of Disbursement 09 / 09 / 2010
	Mailing Address 6450 Sprint Pkwy	Amount of Each Disbursement this Period 64.65
	City Overland Park State KS Zip Code 66251-6105	
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Emily McIlveene	Transaction ID: D322948 Date of Disbursement 09 / 09 / 2010
	Mailing Address 2772 SW 137th Ave	Amount of Each Disbursement this Period 261.84
	City Miami State FL Zip Code 33175-6638	
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Florida's Turnpike	Transaction ID: D322951 Date of Disbursement 09 / 09 / 2010
	Mailing Address Turnpike Mile Post 263 Bldg. 5315	Amount of Each Disbursement this Period 3.75
	City Ocoee State FL Zip Code 34761	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

261.84

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Shell Gas - Corporate</p> <p>Mailing Address PO Box 2463</p> <p>City Houston State TX Zip Code 77252-2463</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322950</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="158.09"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Admin Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322949</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Andrea D Huerfano</p> <p>Mailing Address 2949 Riverside Dr Apt 227</p> <p>City Coral Springs State FL Zip Code 33065-1017</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322952</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="287.18"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="287.18"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 127 / 281

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 501 El Camino Real</p> <p>City Millbrae State CA Zip Code 94030-2030</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322953</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="148.18"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Metro PCS</p> <p>Mailing Address Downtown</p> <p>City Miami State FL Zip Code 33165</p> <p>Purpose of Disbursement Admin Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322954</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="99.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Sunpass</p> <p>Mailing Address 605 Suwannee St</p> <p>City Tallahassee State FL Zip Code 32399-3601</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322955</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="40.00"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Tarin Nix</p> <p>Mailing Address 2704 French Pl Apt G</p> <p>City Austin State TX Zip Code 78722-2330</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322956 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 421.43</p> <p>Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address PO Box 538695</p> <p>City Atlanta State GA Zip Code 30353-8695</p> <p>Purpose of Disbursement Admin Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322958 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM]</p> <p>Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mobil Gas</p> <p>Mailing Address 4705 W Lake Mary Blvd</p> <p>City Lake Mary State FL Zip Code 32746-4305</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322960 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 281.43</p> <p>[MEMO ITEM]</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

421.43

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sunpass	Transaction ID: D322961 Date of Disbursement 09 / 09 / 2010
	Mailing Address 605 Suwannee St	Amount of Each Disbursement this Period 40.00
	City Tallahassee State FL Zip Code 32399-3601	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	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:	

B.	Full Name (Last, First, Middle Initial) Ashley Ball	Transaction ID: D322962 Date of Disbursement 09 / 09 / 2010
	Mailing Address 822 E 15th Ave	Amount of Each Disbursement this Period 109.63
	City New Smyrna Beach State FL Zip Code 32169-3404	
	Purpose of Disbursement Staff Reimbursement	[MEMO ITEM]
	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:	

C.	Full Name (Last, First, Middle Initial) Ashley Ball	Transaction ID: D322963 Date of Disbursement 09 / 09 / 2010
	Mailing Address 822 E 15th Ave	Amount of Each Disbursement this Period 109.63
	City New Smyrna Beach State FL Zip Code 32169-3404	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	109.63
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Suzanne Kosmas

Transaction ID: D322964
Date of Disbursement

Mailing Address 920 E 3rd Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

City State Zip Code
New Smyrna Beach FL 32169-3147

Amount of Each Disbursement this Period

850.00

Purpose of Disbursement
Office Equipment
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
3604 Corporation, LLC

Transaction ID: D372671
Date of Disbursement

Mailing Address 2691 Gingerwood Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

City State Zip Code
New Smyrna Beach FL 32168-5466

Amount of Each Disbursement this Period

850.00

Purpose of Disbursement
Office Equipment
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Hector Martinez

Transaction ID: D322965
Date of Disbursement

Mailing Address 11100 SW 46th St

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

City State Zip Code
Miami FL 33165-4735

Amount of Each Disbursement this Period

231.59

Purpose of Disbursement
Staff Reimbursement
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

1081.59

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 538695 City Atlanta State GA Zip Code 30353-8695 Purpose of Disbursement Admin Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322967 Date of Disbursement 09 / 09 / 2010
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Mobil Gas Mailing Address 4705 W Lake Mary Blvd City Lake Mary State FL Zip Code 32746-4305 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322966 Date of Disbursement 09 / 09 / 2010
	Amount of Each Disbursement this Period 131.59 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Maria Quezada Mailing Address 322 E Mayfield Blvd City San Antonio State TX Zip Code 78214-2448 Purpose of Disbursement Staff Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322968 Date of Disbursement 09 / 09 / 2010
	Amount of Each Disbursement this Period 447.00

SUBTOTAL of Disbursements This Page (optional) ▶

447.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) AT&T Mobility Mailing Address PO Box 538695 City Atlanta State GA Zip Code 30353-8695 Purpose of Disbursement Admin Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322970 Date of Disbursement 09 / 09 / 2010
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Mobil Gas Mailing Address 4705 W Lake Mary Blvd City Lake Mary State FL Zip Code 32746-4305 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322969 Date of Disbursement 09 / 09 / 2010
	Amount of Each Disbursement this Period 347.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Esther Arregui Mailing Address 902 Lisbon St City Coral Gables State FL Zip Code 33134-2240 Purpose of Disbursement Staff Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322971 Date of Disbursement 09 / 09 / 2010
	Amount of Each Disbursement this Period 14.22

SUBTOTAL of Disbursements This Page (optional) ▶	14.22
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Citgo - Corporate</p> <p>Mailing Address 1293 Eldridge Pkwy</p> <p>City Houston State TX Zip Code 77077-1670</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323020</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.22"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Justin Shoham</p> <p>Mailing Address 28 Lark Pl</p> <p>City Old Bridge State NJ Zip Code 08857-3062</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323009</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="227.47"/></p>
<p>C. Full Name (Last, First, Middle Initial) Citgo - Corporate</p> <p>Mailing Address 1293 Eldridge Pkwy</p> <p>City Houston State TX Zip Code 77077-1670</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323013</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="127.47"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="227.47"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D323012 Date of Disbursement 09 / 09 / 2010
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 100.00
	City Dallas State TX Zip Code 75266-0108	
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Denise Rodriguez	Transaction ID: D323021 Date of Disbursement 09 / 09 / 2010
	Mailing Address 12514 Wandering Brook Dr	Amount of Each Disbursement this Period 237.91
	City Charlotte State NC Zip Code 28273-6974	
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: D323023 Date of Disbursement 09 / 09 / 2010
	Mailing Address PO Box 538695	Amount of Each Disbursement this Period 100.00
	City Atlanta State GA Zip Code 30353-8695	
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

237.91

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Citgo - Corporate Mailing Address 1293 Eldridge Pkwy City Houston State TX Zip Code 77077-1670 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323022 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 137.91
	[MEMO ITEM]
	Category/Type

B. Full Name (Last, First, Middle Initial) Jordan J Budd Mailing Address 128 Century Dr City Easley State SC Zip Code 29642 Purpose of Disbursement Staff Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323342 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 192.06
	[MEMO ITEM]
	Category/Type

C. Full Name (Last, First, Middle Initial) Jordan J Budd Mailing Address 128 Century Dr City Easley State SC Zip Code 29642 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323343 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 192.06
	[MEMO ITEM]
	Category/Type

SUBTOTAL of Disbursements This Page (optional)	192.06
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Craig Borkon</p> <p>Mailing Address 8571 Brody Way ---</p> <p>City Boca Raton State FL Zip Code 33433-7647</p> <p>Purpose of Disbursement Phone Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324720 Date of Disbursement: 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) AT&T Mobility</p> <p>Mailing Address PO Box 538695</p> <p>City Atlanta State GA Zip Code 30353-8695</p> <p>Purpose of Disbursement Admin Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D372670 Date of Disbursement: 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Christopher Turner</p> <p>Mailing Address 2626 E Park Ave Apt 6104</p> <p>City Tallahassee State FL Zip Code 32301-0816</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324875 Date of Disbursement: 09 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 239.85</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

639.85

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Publix Super Markets, Inc.</p> <p>Mailing Address PO Box 407</p> <p>City Lakeland State FL Zip Code 33802-0407</p> <p>Purpose of Disbursement Admin Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324876</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="239.85"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Ashley Ball</p> <p>Mailing Address 822 E 15th Ave</p> <p>City New Smyrna Beach State FL Zip Code 32169-3404</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324911</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="473.03"/></p>
<p>C. Full Name (Last, First, Middle Initial) Ashley Ball</p> <p>Mailing Address 822 E 15th Ave</p> <p>City New Smyrna Beach State FL Zip Code 32169-3404</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324912</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="406.10"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="473.03"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Publix Super Markets, Inc.	Transaction ID: D324914 Date of Disbursement 09 / 21 / 2010
	Mailing Address PO Box 407	
	City Lakeland State FL Zip Code 33802-0407	Amount of Each Disbursement this Period 66.93
	Purpose of Disbursement Admin Office Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Mildred O. Smith	Transaction ID: D325318 Date of Disbursement 09 / 17 / 2010
	Mailing Address 3550 Esplanade Way Apt 8107	
	City Tallahassee State FL Zip Code 32311-3755	Amount of Each Disbursement this Period 334.98
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Florida's Turnpike	Transaction ID: D325320 Date of Disbursement 09 / 17 / 2010
	Mailing Address Turnpike Mile Post 263 Bldg. 5315	
	City Ocoee State FL Zip Code 34761	Amount of Each Disbursement this Period 17.25
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	334.98
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Shell Gas - Corporate	Transaction ID: D325319 Date of Disbursement 09 / 17 / 2010
	Mailing Address PO Box 2463	Amount of Each Disbursement this Period 317.73
	City Houston State TX Zip Code 77252-2463	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D325536 Date of Disbursement 09 / 24 / 2010
	Mailing Address 920 E 3rd Ave	Amount of Each Disbursement this Period 233.08
	City New Smyrna Beach State FL Zip Code 32169-3147	
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D325537 Date of Disbursement 09 / 24 / 2010
	Mailing Address 920 E 3rd Ave	Amount of Each Disbursement this Period 233.08
	City New Smyrna Beach State FL Zip Code 32169-3147	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	233.08
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Ogden Frank Clark</p> <p>Mailing Address 3100 NE 49th St</p> <p>City Fort Lauderdale State FL Zip Code 33308-4902</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325538</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="302.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida</p> <p>Mailing Address PO Box 2210</p> <p>City Jacksonville State FL Zip Code 32203-2210</p> <p>Purpose of Disbursement Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325539</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="302.00"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Dan Finer</p> <p>Mailing Address 6050 River Trace Rd</p> <p>City Tampa State FL Zip Code 33617-9100</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D325540</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.17"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="320.17"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Hannaford Brand Foods Mailing Address 8 Merchants Way City Middleboro State MA Zip Code 02346-1818 Purpose of Disbursement Admin Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D325541 Date of Disbursement 09 / 24 / 2010
	Amount of Each Disbursement this Period 18.17 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Connor Davis Mailing Address 116 7th Ave N City Saint Petersburg State FL Zip Code 33701-2516 Purpose of Disbursement Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D325546 Date of Disbursement 09 / 24 / 2010
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Miguel Reinoso Mailing Address 8325 June St City Tampa State FL Zip Code 33615-2814 Purpose of Disbursement Admin Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D325547 Date of Disbursement 09 / 24 / 2010
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	100.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ashley Walker	Transaction ID: D325557 Date of Disbursement 09 / 24 / 2010
	Mailing Address 1007 N Federal Hwy 1010 Seminole Dr., #1001	Amount of Each Disbursement this Period 1204.06
	City Ft Lauderdale State FL Zip Code 33304-1422	
	Purpose of Disbursement Admin Office Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amazon.Com	Transaction ID: D372672 Date of Disbursement 09 / 24 / 2010
	Mailing Address 1200 12th Ave S	Amount of Each Disbursement this Period 360.50
	City Seattle State WA Zip Code 98144-2712	
	Purpose of Disbursement Admin Office Supplies Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Hotwire.com Online Travel	Transaction ID: D372675 Date of Disbursement 09 / 24 / 2010
	Mailing Address 333 Market St Ste 100	Amount of Each Disbursement this Period 60.56
	City San Francisco State CA Zip Code 94105-2146	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	1204.06
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Office Depot-Corporate Mailing Address PO Box 633211 City Cincinnati State OH Zip Code 45263-3211 Purpose of Disbursement Admin Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D372674 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 466.88 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address 2425 Wyman St City Dallas State TX Zip Code 75235-2501 Purpose of Disbursement Air Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D372673 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 239.40 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) The Home Depot Mailing Address 9941 E Adamo Dr City Tampa State FL Zip Code 33619-2617 Purpose of Disbursement Admin Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D372676 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 76.72 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Stephen Carville	Transaction ID: D325700 Date of Disbursement 09 / 28 / 2010
	Mailing Address 2401 W Morrison Ave 6610 Burden Ln	Amount of Each Disbursement this Period 74.69
	City Tampa State FL Zip Code 33629-4756	
	Purpose of Disbursement Staff Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Stephen Carville	Transaction ID: D325701 Date of Disbursement 09 / 28 / 2010
	Mailing Address 2401 W Morrison Ave 6610 Burden Ln	Amount of Each Disbursement this Period 74.69
	City Tampa State FL Zip Code 33629-4756	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Jason Lutin	Transaction ID: D326037 Date of Disbursement 09 / 28 / 2010
	Mailing Address 2540 NW 24th St	Amount of Each Disbursement this Period 537.86
	City Boca Raton State FL Zip Code 33434-4359	
	Purpose of Disbursement Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	612.55
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Fedex Kinko's	Transaction ID: D326039 Date of Disbursement 09 / 28 / 2010
	Mailing Address 2417 Ponce De Leon Blvd	Amount of Each Disbursement this Period 177.86
	City Coral Gables State FL Zip Code 33134-6016	
	Purpose of Disbursement Admin Office Supplies	
	Candidate Name	Category/Type
	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:	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D326038 Date of Disbursement 09 / 28 / 2010
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 360.00
	City Dallas State TX Zip Code 75266-0108	
	Purpose of Disbursement Admin Cell Phone	
	Candidate Name	Category/Type
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Pamela Rivera	Transaction ID: D326041 Date of Disbursement 09 / 30 / 2010
	Mailing Address 232 Afton Sq Unit 212	Amount of Each Disbursement this Period 262.01
	City Altamonte Springs State FL Zip Code 32714-3848	
	Purpose of Disbursement Reimbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)

262.01

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Pamela Rivera	Transaction ID: D326042 Date of Disbursement 09 / 30 / 2010
	Mailing Address 232 Afton Sq Unit 212	Amount of Each Disbursement this Period 155.52
	City Altamonte Springs State FL Zip Code 32714-3848	
	Purpose of Disbursement Auto Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) T-Mobile	Transaction ID: D326043 Date of Disbursement 09 / 30 / 2010
	Mailing Address PO Box 742596	Amount of Each Disbursement this Period 106.49
	City Cincinnati State OH Zip Code 45274-2596	
	Purpose of Disbursement Admin Cell Phone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D326044 Date of Disbursement 09 / 30 / 2010
	Mailing Address 920 E 3rd Ave	Amount of Each Disbursement this Period 531.09
	City New Smyrna Beach State FL Zip Code 32169-3147	
	Purpose of Disbursement Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	531.09
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D326045 Date of Disbursement 09 / 30 / 2010
	Mailing Address 920 E 3rd Ave	Amount of Each Disbursement this Period 411.09
	City New Smyrna Beach State FL Zip Code 32169-3147	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	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:	

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D326046 Date of Disbursement 09 / 30 / 2010
	Mailing Address PO Box 660108	Amount of Each Disbursement this Period 120.00
	City Dallas State TX Zip Code 75266-0108	
	Purpose of Disbursement Admin Cell Phone	[MEMO ITEM]
	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:	

C.	Full Name (Last, First, Middle Initial) Christopher Lazo	Transaction ID: D326047 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1951 N Meridian Rd Apt 28	Amount of Each Disbursement this Period 479.75
	City Tallahassee State FL Zip Code 32303-5249	
	Purpose of Disbursement Reimbursement	[MEMO ITEM]
	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:	

SUBTOTAL of Disbursements This Page (optional) ▶

479.75

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Checkers Drive-In Restaurants, Inc.	Transaction ID: D326049 Date of Disbursement 09 / 30 / 2010
	Mailing Address PO Box 1079	
	City Clearwater State FL Zip Code 33757-1079	Amount of Each Disbursement this Period 8.68
	Purpose of Disbursement Lunch Meeting Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Christopher Lazo	Transaction ID: D326048 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1951 N Meridian Rd Apt 28	
	City Tallahassee State FL Zip Code 32303-5249	Amount of Each Disbursement this Period 471.07
	Purpose of Disbursement Auto Travel Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Royal Performance Group	Transaction ID: D326105 Date of Disbursement 09 / 29 / 2010
	Mailing Address 2100 Western Ave Ste 80	
	City Lisle State IL Zip Code 60532-1971	Amount of Each Disbursement this Period 765.00
	Purpose of Disbursement Auto Travel Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	765.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Rugh Cline	Transaction ID: D364346 Date of Disbursement 09 / 21 / 2010
	Mailing Address 7720 Abbott Ave Apt 11	Amount of Each Disbursement this Period 75.00
	City Miami Beach State FL Zip Code 33141-2399	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	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:	

B.	Full Name (Last, First, Middle Initial) Zachary Jones	Transaction ID: D364395 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1555 Delaney Dr Apt 312	Amount of Each Disbursement this Period 100.00
	City Tallahassee State FL Zip Code 32309-3441	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	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:	

C.	Full Name (Last, First, Middle Initial) Jason Lutin	Transaction ID: D364343 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2540 NW 24th St	Amount of Each Disbursement this Period 150.00
	City Boca Raton State FL Zip Code 33434-4359	
	Purpose of Disbursement Auto Travel	[MEMO ITEM]
	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:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	874855.20

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Ramone Anderson</p> <p>Mailing Address 2764 Tess Cir</p> <p>City Tallahassee State FL Zip Code 32304-1167</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326576 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 152.38</p>
<p>B. Full Name (Last, First, Middle Initial) Gaston Araoz</p> <p>Mailing Address 1505 Crystal Dr Apt 504</p> <p>City Arlington State VA Zip Code 22202-4117</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326526 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 831.03</p>
<p>C. Full Name (Last, First, Middle Initial) Gaston Araoz</p> <p>Mailing Address 1505 Crystal Dr Apt 504</p> <p>City Arlington State VA Zip Code 22202-4117</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324403 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 689.48</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1672.89

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Gabrielle Ann Arcangeli	Transaction ID: D323424 Date of Disbursement 09 / 15 / 2010
	Mailing Address 155 Whetherbine Way W	
	City Tallahassee State FL Zip Code 32301-8538	Amount of Each Disbursement this Period 1360.11
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Gabrielle Ann Arcangeli	Transaction ID: D326723 Date of Disbursement 09 / 30 / 2010
	Mailing Address 155 Whetherbine Way W	
	City Tallahassee State FL Zip Code 32301-8538	Amount of Each Disbursement this Period 1360.10
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Scott Arceneaux	Transaction ID: D326708 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1544 Lorimier Rd	
	City Jacksonville State FL Zip Code 32207-4240	Amount of Each Disbursement this Period 4232.09
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6952.30
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Scott Arceneaux</p> <p>Mailing Address 1544 Lorimier Rd</p> <p>City Jacksonville State FL Zip Code 32207-4240</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323421 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 4232.08</p>
<p>B. Full Name (Last, First, Middle Initial) Esther Arregui</p> <p>Mailing Address 902 Lisbon St</p> <p>City Coral Gables State FL Zip Code 33134-2240</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324569 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 689.48</p>
<p>C. Full Name (Last, First, Middle Initial) Alan Awad</p> <p>Mailing Address 13612 Avalon Heights Blvd Apt 204B</p> <p>City Tampa State FL Zip Code 33613-4676</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323432 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1037.55</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5959.11

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Alan Awad</p> <p>Mailing Address 13612 Avalon Heights Blvd Apt 204B</p> <p>City Tampa State FL Zip Code 33613-4676</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326741 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1037.56</p>
<p>B. Full Name (Last, First, Middle Initial) Rishi Bagga</p> <p>Mailing Address 3619 Devereaux Ct</p> <p>City Orlando State FL Zip Code 32837-5463</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326805 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1207.77</p>
<p>C. Full Name (Last, First, Middle Initial) Ashley Ball</p> <p>Mailing Address 822 E 15th Ave</p> <p>City New Smyrna Beach State FL Zip Code 32169-3404</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326512 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1802.98</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4048.31

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ashley Ball	Transaction ID: D324398 Date of Disbursement 09 / 15 / 2010
	Mailing Address 822 E 15th Ave	
	City New Smyrna Beach State FL Zip Code 32169-3404	Amount of Each Disbursement this Period 1802.98
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven Balog	Transaction ID: D323433 Date of Disbursement 09 / 15 / 2010
	Mailing Address 13413 Thomasville Cir	
	City Tampa State FL Zip Code 33617-9344	Amount of Each Disbursement this Period 1118.33
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steven Balog	Transaction ID: D326742 Date of Disbursement 09 / 30 / 2010
	Mailing Address 13413 Thomasville Cir	
	City Tampa State FL Zip Code 33617-9344	Amount of Each Disbursement this Period 1118.34
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4039.65
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lucas P Barks</p> <p>Mailing Address 71 Gray Rd</p> <p>City Gorham State ME Zip Code 04038-1110</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326527</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 831.03</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lucas P Barks</p> <p>Mailing Address 71 Gray Rd</p> <p>City Gorham State ME Zip Code 04038-1110</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324404</p> <p>Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 689.48</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jason Barnaby</p> <p>Mailing Address 815 McBean Ct</p> <p>City McDonough State GA Zip Code 30252-4162</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323443</p> <p>Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1447.47</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2967.98

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Jason Barnaby <hr/> Mailing Address 815 McBean Ct <hr/> City McDonough State GA Zip Code 30252-4162 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326759 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1447.48
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Boris Bastidas <hr/> Mailing Address 1880 Florida Atlantic Blvd # 24N <hr/> City Boca Raton State FL Zip Code 33431-6455 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326501 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 103.89
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Boris Bastidas <hr/> Mailing Address 1880 Florida Atlantic Blvd # 24N <hr/> City Boca Raton State FL Zip Code 33431-6455 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324640 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 421.83
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1973.20
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Robin Batts</p> <p>Mailing Address 2421 Jackson Bluff Rd Apt 611C</p> <p>City Tallahassee State FL Zip Code 32304-4537</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326570 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 36.94</p>
<p>B. Full Name (Last, First, Middle Initial) Pablo Best</p> <p>Mailing Address 623 N Federal Hwy</p> <p>City Pompano Beach State FL Zip Code 33062-4301</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326598 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 631.48</p>
<p>C. Full Name (Last, First, Middle Initial) Pablo Best</p> <p>Mailing Address 623 N Federal Hwy</p> <p>City Pompano Beach State FL Zip Code 33062-4301</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324641 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 827.26</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1495.68

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Pablo Best	Transaction ID: D324070 Date of Disbursement 09 / 17 / 2010
	Mailing Address 623 N Federal Hwy	Amount of Each Disbursement this Period 700.00
	City Pompano Beach State FL Zip Code 33062-4301	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pablo Best	Transaction ID: D324755 Date of Disbursement 09 / 20 / 2010
	Mailing Address 623 N Federal Hwy	Amount of Each Disbursement this Period 827.26
	City Pompano Beach State FL Zip Code 33062-4301	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Craig Borkon	Transaction ID: D324386 Date of Disbursement 09 / 15 / 2010
	Mailing Address 8571 Brody Way ---	Amount of Each Disbursement this Period 1447.47
	City Boca Raton State FL Zip Code 33433-7647	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2974.73
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Craig Borkon	Transaction ID: D326793 Date of Disbursement 09 / 30 / 2010
	Mailing Address 8571 Brody Way --- City Boca Raton State FL Zip Code 33433-7647	Amount of Each Disbursement this Period 1960.94
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eric Bornstein	Transaction ID: D326764 Date of Disbursement 09 / 30 / 2010
	Mailing Address 12 Bellevue Ave City Dobbs Ferry State NY Zip Code 10522-2606	Amount of Each Disbursement this Period 1447.47
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Bornstein	Transaction ID: D323446 Date of Disbursement 09 / 15 / 2010
	Mailing Address 12 Bellevue Ave City Dobbs Ferry State NY Zip Code 10522-2606	Amount of Each Disbursement this Period 1447.47
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

4855.88

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Eric Bornstein <hr/> Mailing Address 12 Bellevue Ave <hr/> City Dobbs Ferry State NY Zip Code 10522-2606 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323340 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 550.02
B.	Full Name (Last, First, Middle Initial) Jose Bosque <hr/> Mailing Address 2314 Twilight Dr <hr/> City Orlando State FL Zip Code 32825-7414 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326615 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 221.64
C.	Full Name (Last, First, Middle Initial) Joshua Bosque <hr/> Mailing Address 6547 Hiddenwalk Dr Apt A <hr/> City Winter Park State FL Zip Code 32792-8438 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326614 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 221.64

SUBTOTAL of Disbursements This Page (optional)	993.30
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jeffrey E Branch	Transaction ID: D326763 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3700 Capital Cir SE Apt 520	Amount of Each Disbursement this Period 1624.19
	City Tallahassee State FL Zip Code 32311-2706	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jeffrey E Branch	Transaction ID: D323463 Date of Disbursement 09 / 15 / 2010
	Mailing Address 3700 Capital Cir SE Apt 520	Amount of Each Disbursement this Period 1624.19
	City Tallahassee State FL Zip Code 32311-2706	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) William Brookley	Transaction ID: D324650 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1768 16th Ave N	Amount of Each Disbursement this Period 219.33
	City Lake Worth State FL Zip Code 33460-6422	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3467.71
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) William Brookley</p> <p>Mailing Address 1768 16th Ave N</p> <p>City Lake Worth State FL Zip Code 33460-6422</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322563 Date of Disbursement 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>B. Full Name (Last, First, Middle Initial) William Brookley</p> <p>Mailing Address 1768 16th Ave N</p> <p>City Lake Worth State FL Zip Code 33460-6422</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326601 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 265.51</p>
<p>C. Full Name (Last, First, Middle Initial) Wilma Brown</p> <p>Mailing Address 3817 Bennett Rd</p> <p>City Screven State GA Zip Code 31560-9133</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326766 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1014.39</p>

SUBTOTAL of Disbursements This Page (optional)	1359.90
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Wilma Brown</p> <p>Mailing Address 3817 Bennett Rd</p> <p>City Screven State GA Zip Code 31560-9133</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323448 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1014.39</p>
<p>B. Full Name (Last, First, Middle Initial) David Browne</p> <p>Mailing Address 417 S Paloma Pl</p> <p>City Tampa State FL Zip Code 33609-3711</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323447 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2196.66</p>
<p>C. Full Name (Last, First, Middle Initial) David Browne</p> <p>Mailing Address 417 S Paloma Pl</p> <p>City Tampa State FL Zip Code 33609-3711</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326765 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1960.94</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5171.99

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Tina Bruce <hr/> Mailing Address 5973 Jessica Dr <hr/> City Apopka State FL Zip Code 32703-1939 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D364080 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 73.88
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jordan J Budd <hr/> Mailing Address 128 Century Dr <hr/> City Easley State SC Zip Code 29642 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326520 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1207.77
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jordan J Budd <hr/> Mailing Address 128 Century Dr <hr/> City Easley State SC Zip Code 29642 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323341 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1781.65

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

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jordan J Budd	Transaction ID: D324663 Date of Disbursement 09 / 15 / 2010
	Mailing Address 128 Century Dr	Amount of Each Disbursement this Period 821.02
	City Easley State SC Zip Code 29642	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Akeem Carr	Transaction ID: D326571 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1325 W Tharpe St Apt 911	Amount of Each Disbursement this Period 110.82
	City Tallahassee State FL Zip Code 32303-4599	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kevin Chambliss	Transaction ID: D326529 Date of Disbursement 09 / 30 / 2010
	Mailing Address 746 N Annie Glidden Rd Apt 404	Amount of Each Disbursement this Period 854.19
	City Dekalb State IL Zip Code 60115-2130	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1786.03
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Kevin Chambliss <hr/> Mailing Address 746 N Annie Glidden Rd Apt 404 <hr/> City Dekalb State IL Zip Code 60115-2130 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324406 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 712.64
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Michael Church <hr/> Mailing Address 3271 NW 114th Ave <hr/> City Pompano Beach State FL Zip Code 33065-3107 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324643 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 375.51
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Michael Church <hr/> Mailing Address 3271 NW 114th Ave <hr/> City Pompano Beach State FL Zip Code 33065-3107 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326502 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 222.22
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

1310.37

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ogden Frank Clark	Transaction ID: D326193 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3100 NE 49th St	Amount of Each Disbursement this Period 1014.40
	City Fort Lauderdale State FL Zip Code 33308-4902	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ogden Frank Clark	Transaction ID: D324385 Date of Disbursement 09 / 15 / 2010
	Mailing Address 3100 NE 49th St	Amount of Each Disbursement this Period 1014.39
	City Fort Lauderdale State FL Zip Code 33308-4902	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rugh Cline	Transaction ID: D326806 Date of Disbursement 09 / 30 / 2010
	Mailing Address 7720 Abbott Ave Apt 11	Amount of Each Disbursement this Period 1917.40
	City Miami Beach State FL Zip Code 33141-2399	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3946.19
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Matthew Coppens	Transaction ID: D326530 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2830 4th St NW	Amount of Each Disbursement this Period 587.42
	City Naples State FL Zip Code 34120-1394	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Matthew Coppens	Transaction ID: D324554 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2830 4th St NW	Amount of Each Disbursement this Period 666.32
	City Naples State FL Zip Code 34120-1394	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) James Cornille	Transaction ID: D324389 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1301 S Flagler Dr	Amount of Each Disbursement this Period 285.71
	City West Palm Beach State FL Zip Code 33401-6719	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1539.45
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) James Cornille <hr/> Mailing Address 1301 S Flagler Dr <hr/> City West Palm Beach State FL Zip Code 33401-6719 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322544 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 55.00
	Category/Type
	State: District:
B. Full Name (Last, First, Middle Initial) James Cornille <hr/> Mailing Address 1301 S Flagler Dr <hr/> City West Palm Beach State FL Zip Code 33401-6719 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326503 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 184.70
	Category/Type
	State: District:
C. Full Name (Last, First, Middle Initial) Conner Crawford <hr/> Mailing Address 75 N Woodward Ave <hr/> City Tallahassee State FL Zip Code 32313-7500 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326591 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 110.82
	Category/Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	350.52
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Henry Crespo	Transaction ID: D326794 Date of Disbursement 09 / 30 / 2010
	Mailing Address 219 NW 14th Ter 4952 NW 7th Ave, 33127	Amount of Each Disbursement this Period 2735.53
	City Miami State FL Zip Code 33136-1817	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Danielle Davis	Transaction ID: D326504 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2131 NW 152nd St	Amount of Each Disbursement this Period 69.27
	City Opa Locka State FL Zip Code 33054-2804	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Danielle Davis	Transaction ID: D324644 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2131 NW 152nd St	Amount of Each Disbursement this Period 251.08
	City Opa Locka State FL Zip Code 33054-2804	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3055.88
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Clifford Davy	Transaction ID: D323434 Date of Disbursement 09 / 15 / 2010
	Mailing Address 5055 Wellington Park Cir Apt C18	Amount of Each Disbursement this Period 1154.37
	City Orlando State FL Zip Code 32839-4591	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Clifford Davy	Transaction ID: D326743 Date of Disbursement 09 / 30 / 2010
	Mailing Address 5055 Wellington Park Cir Apt C18	Amount of Each Disbursement this Period 1154.38
	City Orlando State FL Zip Code 32839-4591	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kathryn DeCarlo	Transaction ID: D326509 Date of Disbursement 09 / 30 / 2010
	Mailing Address 666 Noe St Unit A	Amount of Each Disbursement this Period 1022.05
	City San Francisco State CA Zip Code 94114-2530	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3330.80

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Nicholas Denmon	Transaction ID: D326767 Date of Disbursement
	Mailing Address 8300 41st Ave N	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Saint Petersburg State FL Zip Code 33709-3943	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="1486.67"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Nicholas Denmon	Transaction ID: D323449 Date of Disbursement
	Mailing Address 8300 41st Ave N	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Saint Petersburg State FL Zip Code 33709-3943	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="1486.67"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Yves Dessin	Transaction ID: D326565 Date of Disbursement
	Mailing Address 2764 Tess Cir	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32304-1167	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary Candidate Name	<input type="text" value="110.82"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3084.16"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michael Deutsch	Transaction ID: D322530 Date of Disbursement 09 / 02 / 2010
	Mailing Address 4125 Georges Way	Amount of Each Disbursement this Period 80.00
	City Boca Raton State FL Zip Code 33434-5345	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Deutsch	Transaction ID: D324652 Date of Disbursement 09 / 15 / 2010
	Mailing Address 4125 Georges Way	Amount of Each Disbursement this Period 80.81
	City Boca Raton State FL Zip Code 33434-5345	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ernest DeZavala	Transaction ID: D364075 Date of Disbursement 09 / 30 / 2010
	Mailing Address 740 Meridale Ave	Amount of Each Disbursement this Period 369.40
	City Orlando State FL Zip Code 32803-4259	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	530.21
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sabrina Diz	Transaction ID: D326531 Date of Disbursement 09 / 30 / 2010
	Mailing Address 142 SE 9th Ct	
	City Hialeah State FL Zip Code 33010-5531	Amount of Each Disbursement this Period 807.87
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sabrina Diz	Transaction ID: D324556 Date of Disbursement 09 / 15 / 2010
	Mailing Address 142 SE 9th Ct	
	City Hialeah State FL Zip Code 33010-5531	Amount of Each Disbursement this Period 666.32
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Edwards	Transaction ID: D326573 Date of Disbursement 09 / 30 / 2010
	Mailing Address 809 Apache St	
	City Tallahassee State FL Zip Code 32301-7003	Amount of Each Disbursement this Period 147.76
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1621.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michael Estell	Transaction ID: D326561 Date of Disbursement 09 / 30 / 2010
	Mailing Address 400 Putnam Dr	
	City Tallahassee State FL Zip Code 32301-6384	Amount of Each Disbursement this Period 106.20
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John Estes	Transaction ID: D326532 Date of Disbursement 09 / 30 / 2010
	Mailing Address 9884 SW 26th Ter	
	City Miami State FL Zip Code 33165-2627	Amount of Each Disbursement this Period 854.20
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John Estes	Transaction ID: D324561 Date of Disbursement 09 / 15 / 2010
	Mailing Address 9884 SW 26th Ter	
	City Miami State FL Zip Code 33165-2627	Amount of Each Disbursement this Period 712.64
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1673.04
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jared Fields	Transaction ID: D326590 Date of Disbursement 09 / 30 / 2010
	Mailing Address 5329 Dreamers Ln	Amount of Each Disbursement this Period 36.94
	City Tallahassee State FL Zip Code 32303-5688	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) David Fifer	Transaction ID: D326768 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2790 Old St Augustine Rd Apt P166	Amount of Each Disbursement this Period 1037.55
	City Tallahassee State FL Zip Code 32301-6214	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David Fifer	Transaction ID: D323450 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2790 Old St Augustine Rd Apt P166	Amount of Each Disbursement this Period 1037.55
	City Tallahassee State FL Zip Code 32301-6214	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2112.04
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Florida Department of State <hr/> Mailing Address 500 S Bronough St R A GRAY BLDG <hr/> City Tallahassee State FL Zip Code 32399-6504 <hr/> Purpose of Disbursement Voter File Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322880 Date of Disbursement 09 / 09 / 2010	Amount of Each Disbursement this Period 10.00
B.	Full Name (Last, First, Middle Initial) Florida Department of State <hr/> Mailing Address 500 S Bronough St R A GRAY BLDG <hr/> City Tallahassee State FL Zip Code 32399-6504 <hr/> Purpose of Disbursement Voter File Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326033 Date of Disbursement 09 / 30 / 2010	Amount of Each Disbursement this Period 10.00
C.	Full Name (Last, First, Middle Initial) Jomar Floyd <hr/> Mailing Address 984 Beaver Creek Way <hr/> City Tallahassee State FL Zip Code 32301-7313 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326577 Date of Disbursement 09 / 30 / 2010	Amount of Each Disbursement this Period 73.88

SUBTOTAL of Disbursements This Page (optional) ▶

93.88

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Marcus Garza	Transaction ID: D326744 Date of Disbursement 09 / 30 / 2010
	Mailing Address 10505 Lake Williams Dr	Amount of Each Disbursement this Period 1037.56
	City Odessa State FL Zip Code 33556-2643	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Marcus Garza	Transaction ID: D323435 Date of Disbursement 09 / 15 / 2010
	Mailing Address 10505 Lake Williams Dr	Amount of Each Disbursement this Period 1037.55
	City Odessa State FL Zip Code 33556-2643	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brendan Gleason	Transaction ID: D324647 Date of Disbursement 09 / 15 / 2010
	Mailing Address 6000 Moss Glen Ct	Amount of Each Disbursement this Period 1615.58
	City Clifton State VA Zip Code 20124-2364	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3690.69

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Brendan Gleason</p> <p>Mailing Address 6000 Moss Glen Ct</p> <p>City Clifton State VA Zip Code 20124-2364</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326595 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1615.58</p>
<p>B. Full Name (Last, First, Middle Initial) John Granger</p> <p>Mailing Address 1331 Alana Dr Apt 107</p> <p>City Orlando State FL Zip Code 32828-7033</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364079 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 295.52</p>
<p>C. Full Name (Last, First, Middle Initial) Michael Gray</p> <p>Mailing Address 920 E 3rd Ave</p> <p>City New Smyrna Beach State FL Zip Code 32169-3147</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326514 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1060.73</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2971.83

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D324399 Date of Disbursement 09 / 15 / 2010
	Mailing Address 920 E 3rd Ave	Amount of Each Disbursement this Period 1060.72
	City New Smyrna Beach State FL Zip Code 32169-3147	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jonterrius Green	Transaction ID: D326568 Date of Disbursement 09 / 30 / 2010
	Mailing Address 902 Apache St	Amount of Each Disbursement this Period 106.20
	City Tallahassee State FL Zip Code 32301-7006	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jennifer Greenfield	Transaction ID: D326804 Date of Disbursement 09 / 30 / 2010
	Mailing Address 5047 17th St	Amount of Each Disbursement this Period 821.02
	City Zephyrhills State FL Zip Code 33542-2147	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1987.94
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Michelle Guerin</p> <p>Mailing Address 8670 Wesleyan Dr Apt 307</p> <p>City Fort Myers State FL Zip Code 33919-5242</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326769 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1060.72</p>
<p>B. Full Name (Last, First, Middle Initial) Michelle Guerin</p> <p>Mailing Address 8670 Wesleyan Dr Apt 307</p> <p>City Fort Myers State FL Zip Code 33919-5242</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323451 Date of Disbursement: 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1447.46</p>
<p>C. Full Name (Last, First, Middle Initial) Leonardo Guevara</p> <p>Mailing Address 1001 Ocala Rd Apt 340</p> <p>City Tallahassee State FL Zip Code 32304-1609</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326563 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 36.94</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2545.12

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ryan Hearn	Transaction ID: D326602 Date of Disbursement 09 / 30 / 2010
	Mailing Address 10937 NW 14th St	
	City Coral Springs State FL Zip Code 33071-8214	Amount of Each Disbursement this Period 69.26
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ryan Hearn	Transaction ID: D324654 Date of Disbursement 09 / 15 / 2010
	Mailing Address 10937 NW 14th St	
	City Coral Springs State FL Zip Code 33071-8214	Amount of Each Disbursement this Period 132.75
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Derek Helmick	Transaction ID: D324388 Date of Disbursement 09 / 15 / 2010
	Mailing Address 3712 NW 49th Ln	
	City Gainesville State FL Zip Code 32605-1081	Amount of Each Disbursement this Period 1154.38
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1356.39
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Derek Helmick	Transaction ID: D326499 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3712 NW 49th Ln	Amount of Each Disbursement this Period 1154.37
	City Gainesville State FL Zip Code 32605-1081	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mario Henderson	Transaction ID: D326771 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1348 Imperial Dr	Amount of Each Disbursement this Period 1037.55
	City Daytona Beach State FL Zip Code 32117-3810	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mario Henderson	Transaction ID: D323452 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1348 Imperial Dr	Amount of Each Disbursement this Period 1037.55
	City Daytona Beach State FL Zip Code 32117-3810	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3229.47
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Samantha Herman</p> <p>Mailing Address 6064 Vista Linda Ln</p> <p>City Boca Raton State FL Zip Code 33433-8223</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322543 Date of Disbursement: 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 85.63</p>
<p>B. Full Name (Last, First, Middle Initial) Evan Honor</p> <p>Mailing Address 160 NW 70th St Apt 104</p> <p>City Boca Raton State FL Zip Code 33487-2379</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322528 Date of Disbursement: 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 28.75</p>
<p>C. Full Name (Last, First, Middle Initial) Andrea D Huerfano</p> <p>Mailing Address 2949 Riverside Dr Apt 227</p> <p>City Coral Springs State FL Zip Code 33065-1017</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324562 Date of Disbursement: 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 666.32</p>

SUBTOTAL of Disbursements This Page (optional) ▶

780.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Andrea D Huerfano</p> <p>Mailing Address 2949 Riverside Dr Apt 227</p> <p>City Coral Springs State FL Zip Code 33065-1017</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326536 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 807.87</p>
<p>B. Full Name (Last, First, Middle Initial) Sidney Issac</p> <p>Mailing Address 6876 Sugarloaf Key St</p> <p>City Lake Worth State FL Zip Code 33467-7652</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326603 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 138.52</p>
<p>C. Full Name (Last, First, Middle Initial) Sidney Issac</p> <p>Mailing Address 6876 Sugarloaf Key St</p> <p>City Lake Worth State FL Zip Code 33467-7652</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324655 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 242.42</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1188.81

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Sidney Issac <hr/> Mailing Address 6876 Sugarloaf Key St <hr/> City Lake Worth State FL Zip Code 33467-7652 Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322542 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 58.13
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Calvin J Ivey, Sr. <hr/> Mailing Address P.O. 6900 <hr/> City Tallahassee State FL Zip Code 32314 Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326186 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 73.88
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Cindy Jeanbaptiste <hr/> Mailing Address 2421 Jackson Bluff Rd Apt 611D <hr/> City Tallahassee State FL Zip Code 32304-4537 Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326569 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 73.88
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	205.89
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Erin Jensen <hr/> Mailing Address 517 Belle Isle Ave <hr/> City Belleair Beach State FL Zip Code 33786-3611 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326745 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1037.56
	Category/Type
	Category/Type
B. Full Name (Last, First, Middle Initial) Erin Jensen <hr/> Mailing Address 517 Belle Isle Ave <hr/> City Belleair Beach State FL Zip Code 33786-3611 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323436 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1037.55
	Category/Type
	Category/Type
C. Full Name (Last, First, Middle Initial) Zachary Jones <hr/> Mailing Address 1555 Delaney Dr Apt 312 <hr/> City Tallahassee State FL Zip Code 32309-3441 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326574 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 138.52
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2213.63

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ricardo Junquera Mailing Address 10041 SW 48th St City Miami State FL Zip Code 33165-6379 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326537 Date of Disbursement 09 / 30 / 2010	Amount of Each Disbursement this Period 807.87
B.	Full Name (Last, First, Middle Initial) Ricardo Junquera Mailing Address 10041 SW 48th St City Miami State FL Zip Code 33165-6379 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324563 Date of Disbursement 09 / 15 / 2010	Amount of Each Disbursement this Period 666.32
C.	Full Name (Last, First, Middle Initial) Ben King Mailing Address 3425 Mission Bay Blvd City Orlando State FL Zip Code 32817-1993 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324401 Date of Disbursement 09 / 15 / 2010	Amount of Each Disbursement this Period 821.02

SUBTOTAL of Disbursements This Page (optional) ▶

2295.21

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Ben King	Transaction ID: D326518 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3425 Mission Bay Blvd	Amount of Each Disbursement this Period 821.03
	City Orlando State FL Zip Code 32817-1993	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Daniel Krassner	Transaction ID: D326774 Date of Disbursement 09 / 30 / 2010
	Mailing Address 715 N Calhoun St Apt 4	Amount of Each Disbursement this Period 1479.63
	City Tallahassee State FL Zip Code 32303-8706	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Daniel Krassner	Transaction ID: D323454 Date of Disbursement 09 / 15 / 2010
	Mailing Address 715 N Calhoun St Apt 4	Amount of Each Disbursement this Period 831.36
	City Tallahassee State FL Zip Code 32303-8706	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3132.02
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) David Lam <hr/> Mailing Address 136 Upper Ferry Rd <hr/> City Ewing State NJ Zip Code 08628-1529 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324637 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2627.90
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) David Lam <hr/> Mailing Address 136 Upper Ferry Rd <hr/> City Ewing State NJ Zip Code 08628-1529 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326500 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1624.19
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mauricio Lamas <hr/> Mailing Address 23141 SW 124th Ave <hr/> City Miami State FL Zip Code 33170-6309 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326618 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 923.50
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5175.59
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Mauricio Lamas</p> <p>Mailing Address 23141 SW 124th Ave</p> <p>City Miami State FL Zip Code 33170-6309</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324660 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 923.50</p>
<p>B. Full Name (Last, First, Middle Initial) Varjone Leone</p> <p>Mailing Address 1424 Fisher Ln Apt B</p> <p>City Tallahassee State FL Zip Code 32301-4948</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326560 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 41.56</p>
<p>C. Full Name (Last, First, Middle Initial) Joshua H Loewenstein</p> <p>Mailing Address 1908 NW 4th Ave Apt 108</p> <p>City Boca Raton State FL Zip Code 33432-1501</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326187 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1060.73</p>

SUBTOTAL of Disbursements This Page (optional)	2025.79
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Joshua H Loewenstein</p> <p>Mailing Address 1908 NW 4th Ave Apt 108</p> <p>City Boca Raton State FL Zip Code 33432-1501</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324384 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1060.72</p>
<p>B. Full Name (Last, First, Middle Initial) Jason Lutin</p> <p>Mailing Address 2540 NW 24th St</p> <p>City Boca Raton State FL Zip Code 33434-4359</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323431 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1967.92</p>
<p>C. Full Name (Last, First, Middle Initial) Jason Lutin</p> <p>Mailing Address 2540 NW 24th St</p> <p>City Boca Raton State FL Zip Code 33434-4359</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326740 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1967.92</p>

SUBTOTAL of Disbursements This Page (optional)	4996.56
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Dallas Madison	Transaction ID: D326589 Date of Disbursement 09 / 30 / 2010
	Mailing Address 618 Gunter St	
	City Tallahassee State FL Zip Code 32308-4922	Amount of Each Disbursement this Period 147.76
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Hector Martinez	Transaction ID: D326548 Date of Disbursement 09 / 30 / 2010
	Mailing Address 11100 SW 46th St	
	City Miami State FL Zip Code 33165-4735	Amount of Each Disbursement this Period 807.88
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Hector Martinez	Transaction ID: D324565 Date of Disbursement 09 / 15 / 2010
	Mailing Address 11100 SW 46th St	
	City Miami State FL Zip Code 33165-4735	Amount of Each Disbursement this Period 666.32
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1621.96

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Ilene McCarter</p> <p>Mailing Address 1361 NW 20th Ave Apt 104</p> <p>City Delray Beach State FL Zip Code 33445-1471</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324646 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 204.91</p>
<p>B. Full Name (Last, First, Middle Initial) Ilene McCarter</p> <p>Mailing Address 1361 NW 20th Ave Apt 104</p> <p>City Delray Beach State FL Zip Code 33445-1471</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326506 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 25.98</p>
<p>C. Full Name (Last, First, Middle Initial) Melanie McCarter</p> <p>Mailing Address 1361 NW 20th Ave Apt 104</p> <p>City Delray Beach State FL Zip Code 33445-1471</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326505 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 14.43</p>

SUBTOTAL of Disbursements This Page (optional)	245.32
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Melanie McCarter <hr/> Mailing Address 1361 NW 20th Ave Apt 104 <hr/> City Delray Beach State FL Zip Code 33445-1471 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324645 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 158.73
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Richard McGriff <hr/> Mailing Address 2912 Woodrich Dr <hr/> City Tallahassee State FL Zip Code 32301-3632 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326555 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 36.94
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Emily McIlveene <hr/> Mailing Address 2772 SW 137th Ave <hr/> City Miami State FL Zip Code 33175-6638 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326540 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 831.03
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1026.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Emily McIlveene</p> <p>Mailing Address 2772 SW 137th Ave</p> <p>City Miami State FL Zip Code 33175-6638</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324564 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 689.48</p>
<p>B. Full Name (Last, First, Middle Initial) Michael Mckinnies</p> <p>Mailing Address 3045 W Orange Ave</p> <p>City Tallahassee State FL Zip Code 32310-5915</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326592 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 106.20</p>
<p>C. Full Name (Last, First, Middle Initial) Edgar Mendez</p> <p>Mailing Address 14936 SW 15th Ln</p> <p>City Miami State FL Zip Code 33194-2534</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326553 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 708.86</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1504.54

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Nicholas Michalik <hr/> Mailing Address 9452 Laura Anne Dr <hr/> City Seminole State FL Zip Code 33776-1600 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326796 Date of Disbursement 09 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 1417.21
B.	Full Name (Last, First, Middle Initial) Nicholas Michalik <hr/> Mailing Address 9452 Laura Anne Dr <hr/> City Seminole State FL Zip Code 33776-1600 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323464 Date of Disbursement 09 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 384.08
C.	Full Name (Last, First, Middle Initial) Alyssa Miller <hr/> Mailing Address 900 Riggins Rd Apt 723 <hr/> City Tallahassee State FL Zip Code 32308-2220 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323427 Date of Disbursement 09 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 1295.38

SUBTOTAL of Disbursements This Page (optional) ▶

3096.67

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Alyssa Miller <hr/> Mailing Address 900 Riggins Rd Apt 723 <hr/> City Tallahassee State FL Zip Code 32308-2220 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326728 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1295.39 Category/Type
B. Full Name (Last, First, Middle Initial) Ms. Anne O Morgan <hr/> Mailing Address 741 W Keller St <hr/> City Hernando State FL Zip Code 34442-8810 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326702 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 2907.77 Category/Type
C. Full Name (Last, First, Middle Initial) Ms. Anne O Morgan <hr/> Mailing Address 741 W Keller St <hr/> City Hernando State FL Zip Code 34442-8810 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323419 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 2907.77 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

7110.93

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) George Morse	Transaction ID: D324387 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1908 NW 41st Ave Apt 108	Amount of Each Disbursement this Period 1014.39
	City Boca Raton State FL Zip Code 33432	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) George Morse	Transaction ID: D326498 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1908 NW 41st Ave Apt 108	Amount of Each Disbursement this Period 1014.41
	City Boca Raton State FL Zip Code 33432	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Cary Nation	Transaction ID: D326604 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1400 NW 9th Ave Apt 16	Amount of Each Disbursement this Period 167.38
	City Boca Raton State FL Zip Code 33486-1326	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2196.18

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Cary Nation <hr/> Mailing Address 1400 NW 9th Ave Apt 16 <hr/> City Boca Raton State FL Zip Code 33486-1326 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324656 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 230.87
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cary Nation <hr/> Mailing Address 1400 NW 9th Ave Apt 16 <hr/> City Boca Raton State FL Zip Code 33486-1326 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322533 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 96.25
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Reuben Neff <hr/> Mailing Address 2010 E Palm Ave Apt 14322 <hr/> City Tampa State FL Zip Code 33605-3934 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326801 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 2162.99
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2490.11
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Sophia Nelson	Transaction ID: D324661 Date of Disbursement 09 / 15 / 2010
	Mailing Address 5883 Caribbean Blvd Apt 33407	Amount of Each Disbursement this Period 1192.26
	City West Palm Beach State FL Zip Code 33407-1801	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kerry Nicholson	Transaction ID: D326802 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3252 Sawgrass Creek Cir	Amount of Each Disbursement this Period 1691.54
	City Saint Cloud State FL Zip Code 34772-7941	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tarin Nix	Transaction ID: D326524 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2704 French Pl Apt G	Amount of Each Disbursement this Period 2129.32
	City Austin State TX Zip Code 78722-2330	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5013.12
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Tarin Nix</p> <p>Mailing Address 2704 French Pl Apt G</p> <p>City Austin State TX Zip Code 78722-2330</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324402 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2129.31</p>
<p>B. Full Name (Last, First, Middle Initial) Bernadette Ohran</p> <p>Mailing Address 155 55th Ave NE</p> <p>City Saint Petersburg State FL Zip Code 33703-3011</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323437 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1076.76</p>
<p>C. Full Name (Last, First, Middle Initial) Bernadette Ohran</p> <p>Mailing Address 155 55th Ave NE</p> <p>City Saint Petersburg State FL Zip Code 33703-3011</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326747 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1076.77</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4282.84

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Anthony Parets</p> <p>Mailing Address 3607 Eagle Nest Ct</p> <p>City Melbourne State FL Zip Code 32904-9515</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326775 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1083.88</p>
<p>B. Full Name (Last, First, Middle Initial) Anthony Parets</p> <p>Mailing Address 3607 Eagle Nest Ct</p> <p>City Melbourne State FL Zip Code 32904-9515</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323455 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1083.88</p>
<p>C. Full Name (Last, First, Middle Initial) Mikeal Parlow</p> <p>Mailing Address 615 Mount Olympus Blvd</p> <p>City New Smyrna Beach State FL Zip Code 32168-2421</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326522 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 650.80</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2818.56

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

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

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

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Kristen Pesicek</p> <p>Mailing Address 200 S Birch Rd Apt 611</p> <p>City Fort Lauderdale State FL Zip Code 33316-1535</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326777 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1479.63</p>
<p>B. Full Name (Last, First, Middle Initial) Kristen Pesicek</p> <p>Mailing Address 200 S Birch Rd Apt 611</p> <p>City Fort Lauderdale State FL Zip Code 33316-1535</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323457 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1479.63</p>
<p>C. Full Name (Last, First, Middle Initial) Elena Petrescu</p> <p>Mailing Address 13196 Brechner St</p> <p>City Spring Hill State FL Zip Code 34609-1216</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323456 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 844.15</p>

SUBTOTAL of Disbursements This Page (optional)	3803.41
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Elena Petrescu <hr/> Mailing Address 13196 Brechner St <hr/> City Spring Hill State FL Zip Code 34609-1216 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326776 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1037.55
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Steven Phillips-Horst <hr/> Mailing Address 289 Harman St Apt 2L <hr/> City Brooklyn State NY Zip Code 11237-4946 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326807 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 885.99
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Joseph J Pierce <hr/> Mailing Address 2656 S Scenic Hwy <hr/> City Lake Wales State FL Zip Code 33898-7409 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326748 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1014.40
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2937.94
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Joseph J Pierce	Transaction ID: D323438 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2656 S Scenic Hwy	Amount of Each Disbursement this Period 1014.39
	City Lake Wales State FL Zip Code 33898-7409	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Douglas R. Pugh	Transaction ID: D322541 Date of Disbursement 09 / 02 / 2010
	Mailing Address PO Box 272813	Amount of Each Disbursement this Period 21.88
	City Boca Raton State FL Zip Code 33427-2813	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Douglas R. Pugh	Transaction ID: D324390 Date of Disbursement 09 / 15 / 2010
	Mailing Address PO Box 272813	Amount of Each Disbursement this Period 248.19
	City Boca Raton State FL Zip Code 33427-2813	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1284.46
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Michael Pugh <hr/> Mailing Address 611 SE 10th St <hr/> City Pompano Beach State FL Zip Code 33060-9405 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324391 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 509.33
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Michael Pugh <hr/> Mailing Address 611 SE 10th St <hr/> City Pompano Beach State FL Zip Code 33060-9405 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322536 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 115.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Michael Pugh <hr/> Mailing Address 611 SE 10th St <hr/> City Pompano Beach State FL Zip Code 33060-9405 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326507 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 210.69
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	835.02
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Maria Quezada	Transaction ID: D326549 Date of Disbursement 09 / 30 / 2010
	Mailing Address 322 E Mayfield Blvd	Amount of Each Disbursement this Period 807.88
	City San Antonio State TX Zip Code 78214-2448	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Maria Quezada	Transaction ID: D324566 Date of Disbursement 09 / 15 / 2010
	Mailing Address 322 E Mayfield Blvd	Amount of Each Disbursement this Period 666.32
	City San Antonio State TX Zip Code 78214-2448	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Margaret Ramirez	Transaction ID: D323439 Date of Disbursement 09 / 15 / 2010
	Mailing Address 13671 SW 38th Avenue Rd	Amount of Each Disbursement this Period 566.09
	City Ocala State FL Zip Code 34473-2105	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2040.29
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Margaret Ramirez</p> <p>Mailing Address 13671 SW 38th Avenue Rd</p> <p>City Ocala State FL Zip Code 34473-2105</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326750 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1055.71</p>
<p>B. Full Name (Last, First, Middle Initial) Edgar Rincon</p> <p>Mailing Address 225 SW 159th Way</p> <p>City Sunrise State FL Zip Code 33326-2274</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326798 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1037.55</p>
<p>C. Full Name (Last, First, Middle Initial) Edgar Rincon</p> <p>Mailing Address 225 SW 159th Way</p> <p>City Sunrise State FL Zip Code 33326-2274</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323465 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1585.56</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3678.82

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Pamela Rivera <hr/> Mailing Address 232 Afton Sq Unit 212 <hr/> City Altamonte Springs State FL Zip Code 32714-3848 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324400 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 1037.55
B.	Full Name (Last, First, Middle Initial) Pamela Rivera <hr/> Mailing Address 232 Afton Sq Unit 212 <hr/> City Altamonte Springs State FL Zip Code 32714-3848 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326516 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 1037.56
C.	Full Name (Last, First, Middle Initial) Terrie L. Rizzo <hr/> Mailing Address 737 NE Boca Bay Colony Dr <hr/> City Boca Raton State FL Zip Code 33487-1755 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326597 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 923.50

SUBTOTAL of Disbursements This Page (optional) ▶

2998.61

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Terrie L. Rizzo <hr/> Mailing Address 737 NE Boca Bay Colony Dr <hr/> City Boca Raton State FL Zip Code 33487-1755 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324648 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 923.50
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Edith Robles <hr/> Mailing Address 305 Bullard St <hr/> City Fairfield State CT Zip Code 06825-3719 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323458 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 2076.75
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Edith Robles <hr/> Mailing Address 305 Bullard St <hr/> City Fairfield State CT Zip Code 06825-3719 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326778 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 2076.75
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5077.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Denise Rodriguez	Transaction ID: D326550 Date of Disbursement 09 / 30 / 2010
	Mailing Address 12514 Wandering Brook Dr	Amount of Each Disbursement this Period 807.87
	City Charlotte State NC Zip Code 28273-6974	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Denise Rodriguez	Transaction ID: D324567 Date of Disbursement 09 / 15 / 2010
	Mailing Address 12514 Wandering Brook Dr	Amount of Each Disbursement this Period 666.32
	City Charlotte State NC Zip Code 28273-6974	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joshua Romero	Transaction ID: D323459 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2302 Simpson Ridge Cir Apt C	Amount of Each Disbursement this Period 1383.00
	City Kissimmee State FL Zip Code 34744-4487	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2857.19
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Joshua Romero <hr/> Mailing Address 2302 Simpson Ridge Cir Apt C <hr/> City Kissimmee State FL Zip Code 34744-4487 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326779 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1060.72
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Jean Roseme <hr/> Mailing Address 101 NE 31st St <hr/> City Pompano Beach State FL Zip Code 33064-3645 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326781 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1462.79
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Jean Roseme <hr/> Mailing Address 101 NE 31st St <hr/> City Pompano Beach State FL Zip Code 33064-3645 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323466 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1462.79
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

3986.30

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Alexander Ross</p> <p>Mailing Address 17789 Fieldbrook Cir W</p> <p>City Boca Raton State FL Zip Code 33496-1567</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324657 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 380.65</p>
<p>B. Full Name (Last, First, Middle Initial) Alexander Ross</p> <p>Mailing Address 17789 Fieldbrook Cir W</p> <p>City Boca Raton State FL Zip Code 33496-1567</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326605 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 46.17</p>
<p>C. Full Name (Last, First, Middle Initial) Maia Ryan</p> <p>Mailing Address 726 Maryland Ave</p> <p>City Winter Park State FL Zip Code 32789-5042</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D364076 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 110.82</p>

SUBTOTAL of Disbursements This Page (optional) ▶

537.64

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Gabriel Sebag	Transaction ID: D326782
	Mailing Address 635 Stillview Cir	Date of Disbursement 09 / 30 / 2010
	City Brandon State FL Zip Code 33510-2124	Amount of Each Disbursement this Period 1060.72
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Gabriel Sebag	Transaction ID: D323460
	Mailing Address 635 Stillview Cir	Date of Disbursement 09 / 15 / 2010
	City Brandon State FL Zip Code 33510-2124	Amount of Each Disbursement this Period 802.86
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Philip Shaw	Transaction ID: D326803
	Mailing Address 24 Coventry Ct	Date of Disbursement 09 / 30 / 2010
	City Kissimmee State FL Zip Code 34758-2940	Amount of Each Disbursement this Period 1378.60
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3242.18
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Vito D Sheeley <hr/> Mailing Address 2111 Almeria Way S <hr/> City Saint Petersburg State FL Zip Code 33712-4418 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326800 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1014.39
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Vito D Sheeley <hr/> Mailing Address 2111 Almeria Way S <hr/> City Saint Petersburg State FL Zip Code 33712-4418 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323467 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1014.39
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Justin Shoham <hr/> Mailing Address 28 Lark Pl <hr/> City Old Bridge State NJ Zip Code 08857-3062 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324568 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 666.32
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2695.10

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Justin Shoham Mailing Address 28 Lark Pl City Old Bridge State NJ Zip Code 08857-3062 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326551 Date of Disbursement 09 / 30 / 2010 Amount of Each Disbursement this Period 807.88
B.	Full Name (Last, First, Middle Initial) Dana Singer Mailing Address 622 8th St City Marietta State OH Zip Code 45750-1937 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326795 Date of Disbursement 09 / 30 / 2010 Amount of Each Disbursement this Period 906.02
C.	Full Name (Last, First, Middle Initial) Jacob Smith Mailing Address 2121 Intracoastal Dr City Fort Lauderdale State FL Zip Code 33305-3637 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326756 Date of Disbursement 09 / 30 / 2010 Amount of Each Disbursement this Period 1037.54

SUBTOTAL of Disbursements This Page (optional) ▶

2751.44

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jacob Smith	Transaction ID: D323441 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2121 Intracoastal Dr	Amount of Each Disbursement this Period 554.12
	City Fort Lauderdale State FL Zip Code 33305-3637	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mildred O. Smith	Transaction ID: D323420 Date of Disbursement 09 / 15 / 2010
	Mailing Address 3550 Esplanade Way Apt 8107	Amount of Each Disbursement this Period 1512.05
	City Tallahassee State FL Zip Code 32311-3755	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mildred O. Smith	Transaction ID: D326705 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3550 Esplanade Way Apt 8107	Amount of Each Disbursement this Period 1512.05
	City Tallahassee State FL Zip Code 32311-3755	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3578.22
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Joshua Solomon</p> <p>Mailing Address 5575 NW 119th Drive</p> <p>City Pompano Beach State FL Zip Code 33076</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322606 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 150.07</p>
<p>B. Full Name (Last, First, Middle Initial) Joshua Solomon</p> <p>Mailing Address 5575 NW 119th Drive</p> <p>City Pompano Beach State FL Zip Code 33076</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322564 Date of Disbursement: 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 88.75</p>
<p>C. Full Name (Last, First, Middle Initial) Joshua Solomon</p> <p>Mailing Address 5575 NW 119th Drive</p> <p>City Pompano Beach State FL Zip Code 33076</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D324658 Date of Disbursement: 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 245.31</p>

SUBTOTAL of Disbursements This Page (optional) ▶

484.13

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Naomi Soto	Transaction ID: D364078 Date of Disbursement 09 / 30 / 2010
	Mailing Address 494 Green Spring Cir	Amount of Each Disbursement this Period 289.04
	City Winter Springs State FL Zip Code 32708-3026	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Reamonn Soto	Transaction ID: D326558 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2110 Hagan Dr	Amount of Each Disbursement this Period 110.82
	City Tallahassee State FL Zip Code 32303-4720	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Clint Starling	Transaction ID: D364077 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3801 Summer Wind Dr	Amount of Each Disbursement this Period 443.28
	City Winter Park State FL Zip Code 32792-5210	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

843.14

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Conrad Stroman	Transaction ID: D326791 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2625 SW 75th St Apt 1331	Amount of Each Disbursement this Period 1625.86
	City Gainesville State FL Zip Code 32608-8351	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Rafael Suarez	Transaction ID: D326508 Date of Disbursement 09 / 30 / 2010
	Mailing Address 100 Golden Isles Dr Apt 1003	Amount of Each Disbursement this Period 316.33
	City Hallandale Beach State FL Zip Code 33009-8811	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Rafael Suarez	Transaction ID: D365738 Date of Disbursement 09 / 15 / 2010
	Mailing Address 100 Golden Isles Dr Apt 1003	Amount of Each Disbursement this Period 446.35
	City Hallandale Beach State FL Zip Code 33009-8811	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2388.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Rafael Suarez <hr/> Mailing Address 100 Golden Isles Dr Apt 1003 <hr/> City Hallandale Beach State FL Zip Code 33009-8811 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D322529 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 45.63
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Omar Syed <hr/> Mailing Address 13538 Lake Magdalene Dr <hr/> City Tampa State FL Zip Code 33613-4130 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326752 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1037.56
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Omar Syed <hr/> Mailing Address 13538 Lake Magdalene Dr <hr/> City Tampa State FL Zip Code 33613-4130 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326754 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1037.55
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2120.74

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Joseph Szerejko	Transaction ID: D326792 Date of Disbursement 09 / 30 / 2010
	Mailing Address 15 Thicket Ln	
	City West Hartford State CT Zip Code 06107-1320	Amount of Each Disbursement this Period 1501.40
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joseph Szerejko	Transaction ID: D323462 Date of Disbursement 09 / 15 / 2010
	Mailing Address 15 Thicket Ln	
	City West Hartford State CT Zip Code 06107-1320	Amount of Each Disbursement this Period 1753.95
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kyree Thomas	Transaction ID: D326567 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1809 Gina Ln	
	City Tallahassee State FL Zip Code 32303-3354	Amount of Each Disbursement this Period 150.07
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3405.42
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Karen L. Thurman <hr/> Mailing Address 9067 SW 190th Avenue Rd <hr/> City Dunnellon State FL Zip Code 34432-2827 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326721 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 3232.95
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Karen L. Thurman <hr/> Mailing Address 9067 SW 190th Avenue Rd <hr/> City Dunnellon State FL Zip Code 34432-2827 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323423 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 3232.95
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Christopher Turner <hr/> Mailing Address 2626 E Park Ave Apt 6104 <hr/> City Tallahassee State FL Zip Code 32301-0816 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324383 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1293.30
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7759.20
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Christopher Turner	Transaction ID: D326184 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2626 E Park Ave Apt 6104	Amount of Each Disbursement this Period 1370.65
	City Tallahassee State FL Zip Code 32301-0816	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Hafsah Ullah	Transaction ID: D326523 Date of Disbursement 09 / 30 / 2010
	Mailing Address 11336 Bridge House Rd	Amount of Each Disbursement this Period 740.53
	City Windermere State FL Zip Code 34786-5405	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Adam Unger	Transaction ID: D326760 Date of Disbursement 09 / 30 / 2010
	Mailing Address 2309 Old Bainbridge Rd # 101 C	Amount of Each Disbursement this Period 1154.37
	City Tallahassee State FL Zip Code 32303-3805	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3265.55

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A. Full Name (Last, First, Middle Initial) Adam Unger</p> <p>Mailing Address 2309 Old Bainbridge Rd # 101 C</p> <p>City Tallahassee State FL Zip Code 32303-3805</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323444 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1154.37</p>
<p>B. Full Name (Last, First, Middle Initial) James Wheeler</p> <p>Mailing Address 2418 Teresa Cir Apt D</p> <p>City Tampa State FL Zip Code 33629-6148</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D323445 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1037.55</p>
<p>C. Full Name (Last, First, Middle Initial) James Wheeler</p> <p>Mailing Address 2418 Teresa Cir Apt D</p> <p>City Tampa State FL Zip Code 33629-6148</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322812 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1279.28</p>

SUBTOTAL of Disbursements This Page (optional)	3471.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) James Wheeler Mailing Address 2418 Teresa Cir Apt D City Tampa State FL Zip Code 33629-6148 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326761 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 1037.55
B.	Full Name (Last, First, Middle Initial) Jennifer Whitcomb Mailing Address 710 13th Ave S City Jacksonville Beach State FL Zip Code 32250-5032 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D326758 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 1501.40
C.	Full Name (Last, First, Middle Initial) Jennifer Whitcomb Mailing Address 710 13th Ave S City Jacksonville Beach State FL Zip Code 32250-5032 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D323442 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 1230.93

SUBTOTAL of Disbursements This Page (optional)		3769.88
TOTAL This Period (last page this line number only)		

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Jennifer Whitcomb	Transaction ID: D323339 Date of Disbursement 09 / 15 / 2010
	Mailing Address 710 13th Ave S	Amount of Each Disbursement this Period 375.00
	City Jacksonville Beach State FL Zip Code 32250-5032	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Delbert Williams	Transaction ID: D326588 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1581 Payne St	Amount of Each Disbursement this Period 184.70
	City Tallahassee State FL Zip Code 32303-5729	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Robert Williams	Transaction ID: D326594 Date of Disbursement 09 / 30 / 2010
	Mailing Address 3612 S Lakewood Dr	Amount of Each Disbursement this Period 184.70
	City Tallahassee State FL Zip Code 32305-5206	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	744.40
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Gordon Wilson	Transaction ID: D326521 Date of Disbursement 09 / 30 / 2010
	Mailing Address 802 Wildwood Cir	Amount of Each Disbursement this Period 821.02
	City Port Orange State FL Zip Code 32127-4870	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Gordon Wilson	Transaction ID: D324662 Date of Disbursement 09 / 15 / 2010
	Mailing Address 802 Wildwood Cir	Amount of Each Disbursement this Period 821.02
	City Port Orange State FL Zip Code 32127-4870	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D324382 Date of Disbursement 09 / 15 / 2010
	Mailing Address 5760 Braveheart Way	Amount of Each Disbursement this Period 821.02
	City Tallahassee State FL Zip Code 32317-9409	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2463.06

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D326183 Date of Disbursement 09 / 30 / 2010
	Mailing Address 5760 Braveheart Way	Amount of Each Disbursement this Period 821.02
	City Tallahassee State FL Zip Code 32317-9409	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Kiara Wright	Transaction ID: D326593 Date of Disbursement 09 / 30 / 2010
	Mailing Address 410 Victory Garden Dr Apt 75	Amount of Each Disbursement this Period 355.55
	City Tallahassee State FL Zip Code 32301-3239	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1176.57

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

217546.82

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 231 / 281	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Production Resource Group			Nature of Debt (Purpose): Audio Visual/Conference
Mailing Address 1902 Cypress Lake Dr			
City Orlando	State FL	ZIP Code 32837-8458	

Outstanding Balance Beginning This Period		Transaction ID: D119404	
18541.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	18541.50	

1) SUBTOTALS This Period This Page (optional).....	18541.50
2) TOTALS This Period (last page this line number only).....	18541.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	18541.50

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

PAGE 32 / 281

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

Fundraising

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

19.00 %

NONFEDERAL %

81.00 %

Transaction ID:
R75

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal	M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0	315212.79

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		167543.39	Transaction ID: T475
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) Jefferson Jackson 2010	147669.40		Transaction ID: T476
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		147669.40	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal	M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0	93671.06

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	93671.06	Transaction ID: T479
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	261214.45
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	147669.40
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	408883.85

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Anagram Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 310 W Jefferson St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Tallahassee	FL	32301-1419																							
Purpose of Disbursement: Admin Lease/Rent			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	0	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D322888																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
801.41		3014.84		3816.25

B. Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 2210			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Jacksonville	FL	32203-2210																							
Purpose of Disbursement: Benefits			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	2	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	0	2	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D322575																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1285.46		4835.80		6121.26

C. Full Name (Last, First, Middle Initial) Blue State Digital, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 734 15th St NW Ste 1200			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Washington	DC	20005-1013																							
Purpose of Disbursement: Admin Website			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	0	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D322885																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
304.13		1144.12		1448.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2391.00		8994.76		11385.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Capital Business Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1851 S Monroe St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D322886			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	0	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	0	/	2	0	1	0																
Tallahassee	FL	32301-5527																							
Purpose of Disbursement: Admin Lease/Rent			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.11		83.19		105.30

B. Full Name (Last, First, Middle Initial) Capital Business Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1851 S Monroe St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D326004			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	8	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	2	8	/	2	0	1	0																
Tallahassee	FL	32301-5527																							
Purpose of Disbursement: Admin Lease/Rent			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.26		211.64		267.90

C. Full Name (Last, First, Middle Initial) Carr, Riggs, & Ingram			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1713 Mahan Dr			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D322883			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	0	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	1	0	/	2	0	1	0																
Tallahassee	FL	32308-1218																							
Purpose of Disbursement: Consulting/ Accounting			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
316.26		1189.74		1506.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
394.63		1484.57		1879.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Century Link			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 96064			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Charlotte	NC	28296-0064		
Purpose of Disbursement: Admin Telephone			Date M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 1 0	
Activity or Event Identifier: Administrative			Transaction ID: D322580	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.79		495.77		627.56

B. Full Name (Last, First, Middle Initial) Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2413 Bayshore Blvd			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tampa	FL	33629-7333		
Purpose of Disbursement: Salary			Date M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0	
Activity or Event Identifier: Administrative			Transaction ID: D323417	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.68		1394.44		1765.12

C. Full Name (Last, First, Middle Initial) Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2413 Bayshore Blvd			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tampa	FL	33629-7333		
Purpose of Disbursement: Salary			Date M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0	
Activity or Event Identifier: Administrative			Transaction ID: D326695	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
335.37		1429.75		1765.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
837.84		3319.96		4157.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Christopher Lazo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1951 N Meridian Rd Apt 28			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32303-5249	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D323428		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

B. Full Name (Last, First, Middle Initial) Christopher Lazo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1951 N Meridian Rd Apt 28			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32303-5249	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D326731		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

C. Full Name (Last, First, Middle Initial) City of Tallahassee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 600 N Monroe St			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32301-1262	Date <input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Utilities			Transaction ID: D325574		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
459.29		1727.80		2187.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
813.85		3061.60		3875.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Comcast			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 105184			Allocated Activity or Event Year-To-Date 949916.37		
City Atlanta	State GA	Zip Code 30348-5184	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2010		
Purpose of Disbursement: Admin Internet			Transaction ID: D324871		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.71		235.89		298.60

B. Full Name (Last, First, Middle Initial) Covenant Hospice			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 107 W 19th St			Allocated Activity or Event Year-To-Date 949916.37		
City Panama City	State FL	Zip Code 32405-4647	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 27 / 2010		
Purpose of Disbursement: Contribution			Transaction ID: D325646		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

C. Full Name (Last, First, Middle Initial) DeltaCom1058			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 740597			Allocated Activity or Event Year-To-Date 949916.37		
City Atlanta	State GA	Zip Code 30374-0597	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 21 / 2010		
Purpose of Disbursement: Admin Telephone			Transaction ID: D324902		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.40		618.48		782.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.61		1051.87		1331.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Disney Destinations, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1000			Allocated Activity or Event Year-To-Date 949916.37		
City Lake Buena Vista	State FL	Zip Code 32830-6000	Date MM / DD / YYYY 09 / 01 / 2010		
Purpose of Disbursement: Site Rental			Transaction ID: D321959		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11550.00		43450.00		55000.00

B. Full Name (Last, First, Middle Initial) Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 949916.37		
City Melbourne	State FL	Zip Code 32904-9515	Date MM / DD / YYYY 09 / 15 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D323418		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.72		1580.66

C. Full Name (Last, First, Middle Initial) Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 949916.37		
City Melbourne	State FL	Zip Code 32904-9515	Date MM / DD / YYYY 09 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D326699		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.71		1580.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12213.88		45947.43		58161.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Everest National Insurance Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 917807			Allocated Activity or Event Year-To-Date 949916.37		
City	State	Zip Code	Category/ Type		
Orlando	FL	32891-7807			
Purpose of Disbursement: Benefits			Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2010		
Activity or Event Identifier: Administrative			Transaction ID: D322509		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.67		190.61		241.28

B. Full Name (Last, First, Middle Initial) FedEx Express Corporations			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 727			Allocated Activity or Event Year-To-Date 949916.37		
City	State	Zip Code	Category/ Type		
Memphis	TN	38194-0001			
Purpose of Disbursement: Admin Shipping			Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 22 / 2010		
Activity or Event Identifier: Administrative			Transaction ID: D325914		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.89		22.14		28.03

C. Full Name (Last, First, Middle Initial) Florida Department of Revenue			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5050 W Tennessee St			Allocated Activity or Event Year-To-Date 949916.37		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32399-6586			
Purpose of Disbursement: Sales Tax			Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 07 / 2010		
Activity or Event Identifier: Administrative			Transaction ID: D322562		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.51		20.74		26.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.07		233.49		295.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Goodies Eatery			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 116 E College Ave			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32301-7704	Date MM / DD / YYYY 09 / 17 / 2010		
Purpose of Disbursement: Lunch Meeting			Transaction ID: D324747		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.12		15.52		19.64

B. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date MM / DD / YYYY 09 / 15 / 2010		
Purpose of Disbursement: Admin Internet			Transaction ID: D328774		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		5.12		6.48

C. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date MM / DD / YYYY 09 / 02 / 2010		
Purpose of Disbursement: Admin Internet			Transaction ID: D322868		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.08		19.10		24.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.56		39.74		50.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date M M / D D / Y Y Y Y 09 / 02 / 2010		
Purpose of Disbursement: Admin Internet			Transaction ID: D322869		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.38		941.92		1192.30

B. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date M M / D D / Y Y Y Y 09 / 27 / 2010		
Purpose of Disbursement: Admin Internet			Transaction ID: D325900		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		1.37		1.73

C. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date M M / D D / Y Y Y Y 09 / 27 / 2010		
Purpose of Disbursement: Admin Internet			Transaction ID: D325901		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		1.37		1.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
251.10		944.66		1195.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Intermedia.Net
Mailing Address
156 W 56th St Ste 1601
City New York **State** NY **Zip Code** 10019-3878
Purpose of Disbursement:
Admin Internet
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 27 / 2010
Transaction ID: D325902

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		1.37		1.73

B. Full Name (Last, First, Middle Initial)
Intermedia.Net
Mailing Address
156 W 56th St Ste 1601
City New York **State** NY **Zip Code** 10019-3878
Purpose of Disbursement:
Admin Internet
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 13 / 2010
Transaction ID: D328784

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.72		6.48		8.20

C. Full Name (Last, First, Middle Initial)
Intermedia.Net
Mailing Address
156 W 56th St Ste 1601
City New York **State** NY **Zip Code** 10019-3878
Purpose of Disbursement:
Admin Internet
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 07 / 2010
Transaction ID: D328785

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.80		3.00		3.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.88		10.85		13.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Intermedia.Net

Mailing Address
156 W 56th St Ste 1601

City State Zip Code
New York NY 10019-3878

Purpose of Disbursement:
Admin Internet

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date 09 / 07 / 2010
Transaction ID: D328787

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.36		8.86		11.22

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

Mailing Address
156 W 56th St Ste 1601

City State Zip Code
New York NY 10019-3878

Purpose of Disbursement:
Admin Internet

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date 09 / 07 / 2010
Transaction ID: D328789

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.36		8.86		11.22

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

Mailing Address
156 W 56th St Ste 1601

City State Zip Code
New York NY 10019-3878

Purpose of Disbursement:
Admin Internet

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date 09 / 07 / 2010
Transaction ID: D328790

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.36		8.86		11.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.08		26.58		33.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																					
City New York	State NY	Zip Code 10019-3878			Category/ Type																			
Purpose of Disbursement: Admin Internet																								
Activity or Event Identifier: Administrative			Date <table style="display:inline-table; border-collapse: collapse;"><tr><td style="border:1px solid black; padding:2px;">M</td><td style="border:1px solid black; padding:2px;">M</td><td style="border:1px solid black; padding:2px;">/</td><td style="border:1px solid black; padding:2px;">D</td><td style="border:1px solid black; padding:2px;">D</td><td style="border:1px solid black; padding:2px;">/</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td></tr><tr><td style="text-align:center;">0</td><td style="text-align:center;">9</td><td></td><td style="text-align:center;">0</td><td style="text-align:center;">7</td><td></td><td style="text-align:center;">2</td><td style="text-align:center;">0</td><td style="text-align:center;">1</td><td style="text-align:center;">0</td></tr></table> Transaction ID: D328791		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		0	7		2	0	1	0															

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.90		3.39		4.29

B. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																					
City New York	State NY	Zip Code 10019-3878			Category/ Type																			
Purpose of Disbursement: Admin Internet																								
Activity or Event Identifier: Administrative			Date <table style="display:inline-table; border-collapse: collapse;"><tr><td style="border:1px solid black; padding:2px;">M</td><td style="border:1px solid black; padding:2px;">M</td><td style="border:1px solid black; padding:2px;">/</td><td style="border:1px solid black; padding:2px;">D</td><td style="border:1px solid black; padding:2px;">D</td><td style="border:1px solid black; padding:2px;">/</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td></tr><tr><td style="text-align:center;">0</td><td style="text-align:center;">9</td><td></td><td style="text-align:center;">2</td><td style="text-align:center;">2</td><td></td><td style="text-align:center;">2</td><td style="text-align:center;">0</td><td style="text-align:center;">1</td><td style="text-align:center;">0</td></tr></table> Transaction ID: D325912		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		2	2		2	0	1	0															

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.72		2.73		3.45

C. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																					
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																					
City New York	State NY	Zip Code 10019-3878			Category/ Type																			
Purpose of Disbursement: Admin Internet																								
Activity or Event Identifier: Administrative			Date <table style="display:inline-table; border-collapse: collapse;"><tr><td style="border:1px solid black; padding:2px;">M</td><td style="border:1px solid black; padding:2px;">M</td><td style="border:1px solid black; padding:2px;">/</td><td style="border:1px solid black; padding:2px;">D</td><td style="border:1px solid black; padding:2px;">D</td><td style="border:1px solid black; padding:2px;">/</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td><td style="border:1px solid black; padding:2px;">Y</td></tr><tr><td style="text-align:center;">0</td><td style="text-align:center;">9</td><td></td><td style="text-align:center;">1</td><td style="text-align:center;">5</td><td></td><td style="text-align:center;">2</td><td style="text-align:center;">0</td><td style="text-align:center;">1</td><td style="text-align:center;">0</td></tr></table> Transaction ID: D328775		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		1	5		2	0	1	0															

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		5.12		6.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.98		11.24		14.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D328778		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		5.12		6.48

B. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D328779		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		5.12		6.48

C. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D328780		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		5.12		6.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.08		15.36		19.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																		
City New York	State NY	Zip Code 10019-3878	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>3</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	0	9	D	D	1	3	Y	Y	Y	Y	2	0	1	0
M	M																				
0	9																				
D	D																				
1	3																				
Y	Y	Y	Y																		
2	0	1	0																		
Purpose of Disbursement: Admin Internet			Transaction ID: D328782																		
Activity or Event Identifier: Administrative																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.72		6.48		8.20

B. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																		
City New York	State NY	Zip Code 10019-3878	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>7</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	0	9	D	D	2	7	Y	Y	Y	Y	2	0	1	0
M	M																				
0	9																				
D	D																				
2	7																				
Y	Y	Y	Y																		
2	0	1	0																		
Purpose of Disbursement: Admin Internet			Transaction ID: D325903																		
Activity or Event Identifier: Administrative																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		1.37		1.73

C. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																		
City New York	State NY	Zip Code 10019-3878	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>7</td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	0	9	D	D	2	7	Y	Y	Y	Y	2	0	1	0
M	M																				
0	9																				
D	D																				
2	7																				
Y	Y	Y	Y																		
2	0	1	0																		
Purpose of Disbursement: Admin Internet			Transaction ID: D325905																		
Activity or Event Identifier: Administrative																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		1.37		1.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.44		9.22		11.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date <input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D325906		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.36		1.37		1.73

B. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D325909		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.72		2.73		3.45

C. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37		
City New York	State NY	Zip Code 10019-3878	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Internet			Transaction ID: D325910		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.72		2.73		3.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80		6.83		8.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Intermedia.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 156 W 56th St Ste 1601			Allocated Activity or Event Year-To-Date 949916.37																		
City New York	State NY	Zip Code 10019-3878	Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>2</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	0	9	D	D	2	2	Y	Y	Y	Y	2	0	1	0
M	M																				
0	9																				
D	D																				
2	2																				
Y	Y	Y	Y																		
2	0	1	0																		
Purpose of Disbursement: Admin Internet			Category/ Type																		
Activity or Event Identifier: Administrative			Transaction ID: D325911																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.72		2.73		3.45

B. Full Name (Last, First, Middle Initial) Intuit Software			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 2632 Marine Way			Allocated Activity or Event Year-To-Date 949916.37																		
City Mountain View	State CA	Zip Code 94043-1126	Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>7</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	0	9	D	D	0	7	Y	Y	Y	Y	2	0	1	0
M	M																				
0	9																				
D	D																				
0	7																				
Y	Y	Y	Y																		
2	0	1	0																		
Purpose of Disbursement: Admin Office Supplies			Category/ Type																		
Activity or Event Identifier: Administrative			Transaction ID: D322607																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.37		144.35		182.72

C. Full Name (Last, First, Middle Initial) John E Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 2257 Collins Rd			Allocated Activity or Event Year-To-Date 949916.37																		
City Cairo	State GA	Zip Code 39828-4917	Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	0	9	D	D	1	5	Y	Y	Y	Y	2	0	1	0
M	M																				
0	9																				
D	D																				
1	5																				
Y	Y	Y	Y																		
2	0	1	0																		
Purpose of Disbursement: Salary			Category/ Type																		
Activity or Event Identifier: Administrative			Transaction ID: D323429																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.91		349.51		442.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.00		496.59		628.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) John E Rogers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2257 Collins Rd			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Cairo	GA	39828-4917																							
Purpose of Disbursement: Salary			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	3	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	3	0	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D326734																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.90		289.27		366.17

B. Full Name (Last, First, Middle Initial) Luke Kosar			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 219 W Orlando St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Orlando	FL	32804-5427																							
Purpose of Disbursement: Salary			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	5	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	5	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D323430																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
309.40		1163.92		1473.32

C. Full Name (Last, First, Middle Initial) Luke Kosar			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 219 W Orlando St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Orlando	FL	32804-5427																							
Purpose of Disbursement: Salary			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	3	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	3	0	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D326735																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
309.40		1163.92		1473.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
695.70		2617.11		3312.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Macy's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1500 Apalachee Pkwy			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32301-3055		
Purpose of Disbursement: Admin Office Supplies			Date M M / D D / Y Y Y Y 09 / 16 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D324478	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.14		90.79		114.93

B. Full Name (Last, First, Middle Initial) Macy's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1500 Apalachee Pkwy			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32301-3055		
Purpose of Disbursement: Admin Office Supplies			Date M M / D D / Y Y Y Y 09 / 16 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D324479	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.69		89.13		112.82

C. Full Name (Last, First, Middle Initial) Microsoft Office			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 Microsoft Way			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Redmond	WA	98052-8300		
Purpose of Disbursement: Admin Office Supplies			Date M M / D D / Y Y Y Y 09 / 07 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D328792	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.16		11.88		15.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.99		191.80		242.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) NAACP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 5892			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32314-5892		
Purpose of Disbursement: Contribution			Date M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0	
Activity or Event Identifier: Administrative			Transaction ID: D325549	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

B. Full Name (Last, First, Middle Initial) NAACP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 5892			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32314-5892		
Purpose of Disbursement: Contribution			Date M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0	
Activity or Event Identifier: Administrative			Transaction ID: D325048	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

C. Full Name (Last, First, Middle Initial) Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 445 Appleyard Dr Apt A2-5			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32304-2868		
Purpose of Disbursement: Salary			Date M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0	
Activity or Event Identifier: Administrative			Transaction ID: D326709	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.66		1037.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
847.89		3189.66		4037.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr Apt A2-5			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32304-2868	Date M M / D D / Y Y Y Y 09 / 15 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D323422		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.67		1037.56

B. Full Name (Last, First, Middle Initial) Office Depot-Corporate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 633211			Allocated Activity or Event Year-To-Date 949916.37		
City Cincinnati	State OH	Zip Code 45263-3211	Date M M / D D / Y Y Y Y 09 / 11 / 2010		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D323081		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.28		65.01		82.29

C. Full Name (Last, First, Middle Initial) Office Depot-Corporate			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 633211			Allocated Activity or Event Year-To-Date 949916.37		
City Cincinnati	State OH	Zip Code 45263-3211	Date M M / D D / Y Y Y Y 09 / 11 / 2010		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D323082		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.83		14.43		18.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
239.00		899.11		1138.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) One Source Supply Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5855 Green Valley Cir Ste 206			Allocated Activity or Event Year-To-Date 949916.37		
City Culver City	State CA	Zip Code 90230-6968	Date MM / DD / YYYY 09 / 21 / 2010		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D324905		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.99		112.84		142.83

B. Full Name (Last, First, Middle Initial) Osmond Johnson Janitorial Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 24131 Lake Talquin Rd			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32310-4603	Date MM / DD / YYYY 09 / 03 / 2010		
Purpose of Disbursement: Janitorial Service			Transaction ID: D322597		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

C. Full Name (Last, First, Middle Initial) Osmond Johnson Janitorial Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 24131 Lake Talquin Rd			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32310-4603	Date MM / DD / YYYY 09 / 17 / 2010		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D324777		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.85		21.99		27.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.84		608.83		770.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) PAC Strategies, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7084			Allocated Activity or Event Year-To-Date 949916.37		
City Alexandria	State VA	Zip Code 22307-0084	Date MM / DD / YYYY 09 / 16 / 2010		
Purpose of Disbursement: Consulting/Compliance			Transaction ID: D323496		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

B. Full Name (Last, First, Middle Initial) PAi			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 60			Allocated Activity or Event Year-To-Date 949916.37		
City De Pere	State WI	Zip Code 54115-0060	Date MM / DD / YYYY 09 / 16 / 2010		
Purpose of Disbursement: Benefits			Transaction ID: D324476		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.27		107.73		133.00

C. Full Name (Last, First, Middle Initial) PAi			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 60			Allocated Activity or Event Year-To-Date 949916.37		
City De Pere	State WI	Zip Code 54115-0060	Date MM / DD / YYYY 09 / 01 / 2010		
Purpose of Disbursement: Benefits			Transaction ID: D322363		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		105.07		133.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
368.20		1397.80		1766.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Tallahassee	FL	32303-4727																							
Purpose of Disbursement: Payroll Tax			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	3	0	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	3	0	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D328503																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
644.25		2423.59		3067.84

B. Full Name (Last, First, Middle Initial) Payroll Matters			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2069 N Monroe St			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Tallahassee	FL	32303-4727																							
Purpose of Disbursement: Payroll Tax			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	5	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	1	5	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D328521																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
649.76		2444.33		3094.09

C. Full Name (Last, First, Middle Initial) PitneyBowes			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 856042 P.O. Box 371896			Allocated Activity or Event Year-To-Date 949916.37																						
City	State	Zip Code	Category/ Type																						
Louisville	KY	40285-6042																							
Purpose of Disbursement: Admin Lease/Rent			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	3	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	9	/	0	3	/	2	0	1	0																
Activity or Event Identifier: Administrative			Transaction ID: D322599																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.63		167.87		212.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1338.64		5035.79		6374.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Principal Financial Group
Mailing Address
PO Box 14416 Dept. 900
City State Zip Code
Des Moines IA 50306-3416
Purpose of Disbursement:
Benefits
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 02 / 2010
Transaction ID: D333472

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.56		524.74		596.30

B. Full Name (Last, First, Middle Initial)
Principal Financial Group
Mailing Address
PO Box 14416 Dept. 900
City State Zip Code
Des Moines IA 50306-3416
Purpose of Disbursement:
Benefits
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 16 / 2010
Transaction ID: D324766

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.98		394.92		499.90

C. Full Name (Last, First, Middle Initial)
Publix Super Markets, Inc.
Mailing Address
PO Box 407
City State Zip Code
Lakeland FL 33802-0407
Purpose of Disbursement:
Lunch Meeting
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 28 / 2010
Transaction ID: D325913

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.93		26.07		33.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
183.47		945.73		1129.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371874 P.O. Box 856042			Allocated Activity or Event Year-To-Date 949916.37		
City Pittsburgh	State PA	Zip Code 15250-7874	Date M M / D D / Y Y Y Y 09 / 21 / 2010		
Purpose of Disbursement: Admin Postage			Transaction ID: D324906		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.06		395.24		500.30

B. Full Name (Last, First, Middle Initial) Renaissance Austin Hotel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9721 Arboretum Blvd			Allocated Activity or Event Year-To-Date 949916.37		
City Austin	State TX	Zip Code 78759-6316	Date M M / D D / Y Y Y Y 09 / 13 / 2010		
Purpose of Disbursement: Travel/Lodging			Transaction ID: D324477		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.94		114.86		141.80

C. Full Name (Last, First, Middle Initial) Ricoh Americas Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21146 Network Pl			Allocated Activity or Event Year-To-Date 949916.37		
City Chicago	State IL	Zip Code 60673-1211	Date M M / D D / Y Y Y Y 09 / 21 / 2010		
Purpose of Disbursement: Admin Lease/Rent			Transaction ID: D324904		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.00		850.20		1076.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
358.00		1360.30		1718.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Sandler, Reiff & Young P.C.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 M St SE Ste 1102			Allocated Activity or Event Year-To-Date 949916.37		
City Washington	State DC	Zip Code 20003-3437	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Consulting/Legal			Transaction ID: D322881		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
336.00		1264.00		1600.00

B. Full Name (Last, First, Middle Initial) Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 949916.37		
City Jacksonville	State FL	Zip Code 32207-4240	Date <input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Travel/Meals			Transaction ID: D324778		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.80		142.20		180.00

C. Full Name (Last, First, Middle Initial) Service Office Supply			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15038			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32317-5038	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D322578		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.38		99.26		125.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
400.18		1505.46		1905.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Sprint
Mailing Address
6450 Sprint Pkwy
City State Zip Code
Overland Park KS 66251-6105
Purpose of Disbursement:
Admin Internet
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 16 / 2010
Transaction ID: D323504

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.15		56.99		72.14

B. Full Name (Last, First, Middle Initial)
Staples Office Supplies
Mailing Address
500 Staples Dr
City State Zip Code
Framingham MA 01702-4478
Purpose of Disbursement:
Admin Office Supplies
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 14 / 2010
Transaction ID: D324480

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.94		52.44		66.38

C. Full Name (Last, First, Middle Initial)
State of Florida Disbursement Unit
Mailing Address
PO Box 8500
City State Zip Code
Tallahassee FL 32314-8500
Purpose of Disbursement:
Payroll Expense
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 24 / 2010
Transaction ID: D325548

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.85		127.36		161.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.94		236.79		299.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Stephen Carville			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2401 W Morrison Ave 6610 Burden Ln			Allocated Activity or Event Year-To-Date 949916.37		
City State Zip Code Tampa FL 33629-4756	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 15 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D323425		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

B. Full Name (Last, First, Middle Initial) Stephen Carville			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2401 W Morrison Ave 6610 Burden Ln			Allocated Activity or Event Year-To-Date 949916.37		
City State Zip Code Tampa FL 33629-4756	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2010		
Purpose of Disbursement: Salary			Transaction ID: D326724		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

C. Full Name (Last, First, Middle Initial) T-Mobile			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 742596			Allocated Activity or Event Year-To-Date 949916.37		
City State Zip Code Cincinnati OH 45274-2596	Category/ Type		Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 10 / 2010		
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D322882		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.97		82.66		104.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
376.53		1416.46		1792.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Tracy N Henderson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 213 Young St			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32301-5437	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D323426		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.59		807.27		1021.86

B. Full Name (Last, First, Middle Initial) Tracy N Henderson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 213 Young St			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32301-5437	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: D326727		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.59		965.27		1221.86

C. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2825 Lone Oak Pkwy Accounting Service Center			Allocated Activity or Event Year-To-Date 949916.37		
City Eagan	State MN	Zip Code 55121-1551	Date <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Admin Shipping			Transaction ID: D325895		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
474.83		1786.29		2261.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) United States Postal Service <hr/> Mailing Address 2825 Lone Oak Pkwy Accounting Service Center <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> <td rowspan="2" style="width:15%; text-align: center; vertical-align: middle;">Category/ Type</td> </tr> <tr> <td>Eagan</td> <td>MN</td> <td>55121-1551</td> </tr> </table> <hr/> Purpose of Disbursement: Admin Shipping	City	State	Zip Code	Category/ Type	Eagan	MN	55121-1551	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">949916.37</div> <hr/> Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">9</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> </tr> </table> Transaction ID: D325898	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	3		2	0	1	0
City	State	Zip Code	Category/ Type																									
Eagan	MN	55121-1551																										
M	M	/	D	D	/	Y	Y	Y	Y																			
0	9		2	3		2	0	1	0																			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.31		14.09		17.40

B. Full Name (Last, First, Middle Initial) United States Postal Service <hr/> Mailing Address 2825 Lone Oak Pkwy Accounting Service Center <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> <td rowspan="2" style="width:15%; text-align: center; vertical-align: middle;">Category/ Type</td> </tr> <tr> <td>Eagan</td> <td>MN</td> <td>55121-1551</td> </tr> </table> <hr/> Purpose of Disbursement: Admin Shipping	City	State	Zip Code	Category/ Type	Eagan	MN	55121-1551	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">949916.37</div> <hr/> Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">9</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> </tr> </table> Transaction ID: D325907	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	1	0
City	State	Zip Code	Category/ Type																									
Eagan	MN	55121-1551																										
M	M	/	D	D	/	Y	Y	Y	Y																			
0	9		2	8		2	0	1	0																			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

C. Full Name (Last, First, Middle Initial) United States Postal Service <hr/> Mailing Address 2825 Lone Oak Pkwy Accounting Service Center <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> <td rowspan="2" style="width:15%; text-align: center; vertical-align: middle;">Category/ Type</td> </tr> <tr> <td>Eagan</td> <td>MN</td> <td>55121-1551</td> </tr> </table> <hr/> Purpose of Disbursement: Admin Shipping	City	State	Zip Code	Category/ Type	Eagan	MN	55121-1551	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">949916.37</div> <hr/> Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">9</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> </tr> </table> Transaction ID: D324881	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	2		2	0	1	0
City	State	Zip Code	Category/ Type																									
Eagan	MN	55121-1551																										
M	M	/	D	D	/	Y	Y	Y	Y																			
0	9		2	2		2	0	1	0																			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.61		41.59		52.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2825 Lone Oak Pkwy Accounting Service Center			Allocated Activity or Event Year-To-Date 949916.37		
City Eagan	State MN	Zip Code 55121-1551	Date M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 1 0		
Purpose of Disbursement: Admin Shipping			Transaction ID: D324882		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

B. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2825 Lone Oak Pkwy Accounting Service Center			Allocated Activity or Event Year-To-Date 949916.37		
City Eagan	State MN	Zip Code 55121-1551	Date M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0		
Purpose of Disbursement: Admin Shipping			Transaction ID: D324885		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.65		13.75		17.40

C. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2825 Lone Oak Pkwy Accounting Service Center			Allocated Activity or Event Year-To-Date 949916.37		
City Eagan	State MN	Zip Code 55121-1551	Date M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 1 0		
Purpose of Disbursement: Admin Shipping			Transaction ID: D324723		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.31		14.09		17.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.61		41.59		52.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) United States Postmaster - Tallahassee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2800 S Adams St			Allocated Activity or Event Year-To-Date 949916.37	
City Tallahassee	State FL	Zip Code 32301-9706	Date M M / D D / Y Y Y Y 09 / 16 / 2010 Transaction ID: D324483	
Purpose of Disbursement: Admin Shipping				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.86		14.51		18.37

B. Full Name (Last, First, Middle Initial) UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 72470244			Allocated Activity or Event Year-To-Date 949916.37	
City Philadelphia	State PA	Zip Code 19170-0001	Date M M / D D / Y Y Y Y 09 / 08 / 2010 Transaction ID: D322878	
Purpose of Disbursement: Admin Shipping				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.01		63.98		80.99

C. Full Name (Last, First, Middle Initial) UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 72470244			Allocated Activity or Event Year-To-Date 949916.37	
City Philadelphia	State PA	Zip Code 19170-0001	Date M M / D D / Y Y Y Y 09 / 09 / 2010 Transaction ID: D322879	
Purpose of Disbursement: Admin Shipping				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.55		220.28		278.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.42		298.77		378.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
UPS

Mailing Address
PO Box 72470244

City State Zip Code
Philadelphia PA 19170-0001

Purpose of Disbursement:
Admin Shipping

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

949916.37

Date 09 / 27 / 2010

Transaction ID: D325654

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
15.45 + 58.10 = 73.55

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

Mailing Address
PO Box 72470244

City State Zip Code
Philadelphia PA 19170-0001

Purpose of Disbursement:
Admin Shipping

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

949916.37

Date 09 / 20 / 2010

Transaction ID: D324752

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
47.67 + 179.33 = 227.00

C. Full Name (Last, First, Middle Initial)
WalMart Stores, Inc.

Mailing Address
702 SW 8th St

City State Zip Code
Bentonville AR 72716-6209

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

949916.37

Date 09 / 10 / 2010

Transaction ID: D323080

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
26.59 + 100.01 = 126.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
89.71 + 337.44 = 427.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) WalMart Stores, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 702 SW 8th St			Allocated Activity or Event Year-To-Date 949916.37		
City	State	Zip Code	Category/ Type		
Bentonville	AR	72716-6209			
Purpose of Disbursement: Admin Office Supplies			Date <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 18 / 2010		
Activity or Event Identifier: Administrative			Transaction ID: D324742		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.95		71.30		90.25

B. Full Name (Last, First, Middle Initial) WebDomains4u.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14455 N Hayden Rd Ste 219			Allocated Activity or Event Year-To-Date 949916.37		
City	State	Zip Code	Category/ Type		
Scottsdale	AZ	85260-6993			
Purpose of Disbursement: Admin Internet			Date <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 24 / 2010		
Activity or Event Identifier: Administrative			Transaction ID: D325908		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.41		24.10		30.51

C. Full Name (Last, First, Middle Initial) Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr Apt A2-5			Allocated Activity or Event Year-To-Date 949916.37		
City	State	Zip Code	Category/ Type		
Tallahassee	FL	32304-2868			
Purpose of Disbursement: Staff Reimbursement			Date <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 01 / 2010		
Activity or Event Identifier: Administrative			Transaction ID: D322312		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71.14		267.61		338.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.50		363.01		459.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Fontainbleau Resort			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4441 Collins Ave			Allocated Activity or Event Year-To-Date [949916.37]	
City	State	Zip Code	Date M M / D D / Y Y Y Y [09 / 01 / 2010]	
Miami Beach	FL	33140-3227		
Purpose of Disbursement: Travel/ Lodging			Transaction ID: D322313	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[60.11]		[226.11]		[286.22]

B. Full Name (Last, First, Middle Initial) Papa John's Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 4209			Allocated Activity or Event Year-To-Date [949916.37]	
City	State	Zip Code	Date M M / D D / Y Y Y Y [09 / 01 / 2010]	
Tallahassee	FL	32315-4209		
Purpose of Disbursement: Dinner Meeting			Transaction ID: D322314	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[5.15]		[19.38]		[24.53]

C. Full Name (Last, First, Middle Initial) Parking Garage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 215 S Monroe St			Allocated Activity or Event Year-To-Date [949916.37]	
City	State	Zip Code	Date M M / D D / Y Y Y Y [09 / 01 / 2010]	
Tallahassee	FL	32301-1839		
Purpose of Disbursement: Auto Travel			Transaction ID: D322315	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[3.36]		[24.64]		[28.00]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.00]		[0.00]		[0.00]

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 949916.37		
City Jacksonville	State FL	Zip Code 32207-4240	Date MM / DD / YYYY 09 / 01 / 2010		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D322613		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.96		628.11		795.07

B. Full Name (Last, First, Middle Initial) Jacob's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 S Adams St			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32301-7719	Date MM / DD / YYYY 09 / 01 / 2010		
Purpose of Disbursement: Breakfast Meeting			Transaction ID: D322615		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.70		55.29		69.99

C. Full Name (Last, First, Middle Initial) Polos on Park			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2626 E Park Ave			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32301-0802	Date MM / DD / YYYY 09 / 01 / 2010		
Purpose of Disbursement: Lodging			Transaction ID: D322614		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.27		572.81		725.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
166.96		628.11		795.07

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Messer, Caparello & Self			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15579			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> Transaction ID: D322884	
Tallahassee	FL	32317-5579		
Purpose of Disbursement: Travel Expense			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.93		537.71		680.64

B. Full Name (Last, First, Middle Initial) Mark Herron, P.A.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 215 S Monroe St Ste 3550			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> Transaction ID: D372695	
Tallahassee	FL	32301-1839		
Purpose of Disbursement: Mileage			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.49		370.51		469.00

C. Full Name (Last, First, Middle Initial) The Westin Diplomat Resort & Spa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3555 S Ocean Dr			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> Transaction ID: D372696	
Hollywood	FL	33019-2827		
Purpose of Disbursement: Travel/Lodging			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.44		167.20		211.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.93		537.71		680.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Ms. Anne O Morgan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 741 W Keller St			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Hernando	FL	34442-8810		
Purpose of Disbursement: Staff Reimbursement			Date M M / D D / Y Y Y Y 09 / 09 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D322889	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

B. Full Name (Last, First, Middle Initial) Blue Cross and Blue Shield of Florida			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2210			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Jacksonville	FL	32203-2210		
Purpose of Disbursement: Benefits			Date M M / D D / Y Y Y Y 09 / 09 / 2010	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D322890	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

C. Full Name (Last, First, Middle Initial) Ms. Christina Boltin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2413 Bayshore Blvd			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tampa	FL	33629-7333		
Purpose of Disbursement: Staff Reimbursement			Date M M / D D / Y Y Y Y 09 / 08 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D322891	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.20		489.80		620.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) AT&T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 538695			Allocated Activity or Event Year-To-Date 949916.37		
City Atlanta	State GA	Zip Code 30353-8695	Date <small>M M / D D / Y Y Y Y</small> 09 / 08 / 2010		
Purpose of Disbursement: Admin Cell Phone			Transaction ID: D322892		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

B. Full Name (Last, First, Middle Initial) Nicholas Pellito			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 445 Appleyard Dr Apt A2-5			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32304-2868	Date <small>M M / D D / Y Y Y Y</small> 09 / 03 / 2010		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D322893		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.95		22.38		28.33

C. Full Name (Last, First, Middle Initial) ACE Hardware			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3626 Apalachee Pkwy			Allocated Activity or Event Year-To-Date 949916.37		
City Tallahassee	State FL	Zip Code 32311-4049	Date <small>M M / D D / Y Y Y Y</small> 09 / 03 / 2010		
Purpose of Disbursement: Admin Office Supplies			Transaction ID: D322894		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.38		12.73		16.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.95		22.38		28.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
WalMart Stores, Inc.
Mailing Address
702 SW 8th St
City Bentonville **State** AR **Zip Code** 72716-6209
Purpose of Disbursement:
Admin Office Supplies
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 03 / 2010
Transaction ID: D322895

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.57		9.65		12.22

B. Full Name (Last, First, Middle Initial)
Karen L. Thurman
Mailing Address
9067 SW 190th Avenue Rd
City Dunnellon **State** FL **Zip Code** 34432-2827
Purpose of Disbursement:
Staff Reimbursement
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 01 / 2010
Transaction ID: D322896

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
408.37		1536.26		1944.63

C. Full Name (Last, First, Middle Initial)
Columbia Restaurant
Mailing Address
2117 E 7th Ave
City Tampa **State** FL **Zip Code** 33605-3903
Purpose of Disbursement:
Travel/Meals
Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
949916.37
Date 09 / 01 / 2010
Transaction ID: D322898

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.63		171.66		217.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
408.37		1536.26		1944.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Dovere Properties, LLC

Mailing Address
310 W Jefferson St Attn: Mr. Leonard Pepper

City	State	Zip Code
Tallahassee	FL	32301-1419

Purpose of Disbursement:
Lodging

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date / /
Transaction ID: D322899

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

B. Full Name (Last, First, Middle Initial)
Florida's Turnpike

Mailing Address
Turnpike Mile Post 263 Bldg. 5315

City	State	Zip Code
Ocoee	FL	34761

Purpose of Disbursement:
Auto Travel

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date / /
Transaction ID: D322900

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.80		10.55		13.35

C. Full Name (Last, First, Middle Initial)
Karen L. Thurman

Mailing Address
9067 SW 190th Avenue Rd

City	State	Zip Code
Dunnellon	FL	34432-2827

Purpose of Disbursement:
Auto Travel

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date / /
Transaction ID: D322897

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.94		406.05		513.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 949916.37		
City Melbourne	State FL	Zip Code 32904-9515	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D323114		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.15		211.21		267.36

B. Full Name (Last, First, Middle Initial) Eric Jotkoff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3607 Eagle Nest Ct			Allocated Activity or Event Year-To-Date 949916.37		
City Melbourne	State FL	Zip Code 32904-9515	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Auto Travel			Transaction ID: D323115		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.15		211.21		267.36

C. Full Name (Last, First, Middle Initial) Ms. Anne O Morgan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 741 W Keller St			Allocated Activity or Event Year-To-Date 949916.37		
City Hernando	State FL	Zip Code 34442-8810	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Staff Reimbursement			Transaction ID: D325306		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.44		682.56		864.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.59		893.77		1131.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Ms. Anne O Morgan

Mailing Address
741 W Keller St

City State Zip Code
Hernando FL 34442-8810

Purpose of Disbursement:
Auto Travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

949916.37

Date 09 / 24 / 2010

Transaction ID: D325307

Activity or Event Identifier:
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.44		682.56		864.00

B. Full Name (Last, First, Middle Initial)
Karen L. Thurman

Mailing Address
9067 SW 190th Avenue Rd

City State Zip Code
Dunnellon FL 34432-2827

Purpose of Disbursement:
Staff Reimbursement

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

949916.37

Date 09 / 24 / 2010

Transaction ID: D325308

Activity or Event Identifier:
Administrative

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.51		366.80		464.31

C. Full Name (Last, First, Middle Initial)
Karen L. Thurman

Mailing Address
9067 SW 190th Avenue Rd

City State Zip Code
Dunnellon FL 34432-2827

Purpose of Disbursement:
Auto Travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

949916.37

Date 09 / 24 / 2010

Transaction ID: D325309

Activity or Event Identifier:
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.22		376.09		464.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.51		366.80		464.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Jacksonville	FL	32207-4240		
Purpose of Disbursement: Staff Reimbursement			Date M M / D D / Y Y Y Y 09 / 30 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D325997	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.25		572.75		725.00

B. Full Name (Last, First, Middle Initial) Polos on Park			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2626 E Park Ave			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32301-0802		
Purpose of Disbursement: Lodging			Date M M / D D / Y Y Y Y 09 / 30 / 2010	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D326001	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.25		572.75		725.00

C. Full Name (Last, First, Middle Initial) Gabrielle Ann Arcangeli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 155 Whetherbine Way W			Allocated Activity or Event Year-To-Date 949916.37	
City	State	Zip Code	Category/ Type	
Tallahassee	FL	32301-8538		
Purpose of Disbursement: Staff Reimbursement			Date M M / D D / Y Y Y Y 09 / 30 / 2010	
Activity or Event Identifier: Administrative			Transaction ID: D326009	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.05		22.74		28.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.30		595.49		753.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Publix Super Markets, Inc.

Mailing Address
PO Box 407

City State Zip Code
Lakeland FL 33802-0407

Purpose of Disbursement:
Admin Office Supplies

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date 09 / 30 / 2010
Transaction ID: D326011

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.47		23.32		28.79

B. Full Name (Last, First, Middle Initial)
Tracy N Henderson

Mailing Address
213 Young St

City State Zip Code
Tallahassee FL 32301-5437

Purpose of Disbursement:
Staff Reimbursement

Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date 09 / 30 / 2010
Transaction ID: D326014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.63		17.44		22.07

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

Mailing Address
1202 N Magnolia Dr

City State Zip Code
Tallahassee FL 32308-4634

Purpose of Disbursement:
Admin Office Supplies

Activity or Event Identifier:
Administrative
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
949916.37

Date 09 / 30 / 2010
Transaction ID: D326017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.63		17.44		22.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.63		17.44		22.07

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Scott Arceneaux			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1544 Lorimier Rd			Allocated Activity or Event Year-To-Date 949916.37	
City Jacksonville	State FL	Zip Code 32207-4240		
Purpose of Disbursement: Staff Reimbursement			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.75		175.89		222.64

B. Full Name (Last, First, Middle Initial) Amtrak			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Mass. Ave.			Allocated Activity or Event Year-To-Date 949916.37	
City Washington	State DC	Zip Code 20005		
Purpose of Disbursement: Auto Travel			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.80		70.71		89.51

C. Full Name (Last, First, Middle Initial) AT&T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 538695			Allocated Activity or Event Year-To-Date 949916.37	
City Atlanta	State GA	Zip Code 30353-8695		
Purpose of Disbursement: Admin Cell Phone			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.96		105.17		133.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.75		175.89		222.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
24652.05	93191.93	117843.98

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SchedL1

NAME OF COMMITTEE (In Full)
DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

NAME OF ACCOUNT
NF expenses

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	6437.91	6437.91
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	6437.91	6437.91
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	6437.91	6437.91