

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.

12FE4M5

RON DESANTIS FOR CONGRESS

ADDRESS (number and street)

PO Box 405

Check if different than previously reported. (ACC)

PONTE VEDRA

FL

32004

2. **FEC IDENTIFICATION NUMBER**

C C00511568

CITY

STATE

ZIP CODE

STATE DISTRICT

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

FL

06

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 ERIC ROBINSON

Signature of Treasurer ERIC ROBINSON

[Electronically Filed]

Date

/ /

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 | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
RON DESANTIS FOR CONGRESS

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 0.00 | 5000.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 0.00 | 5000.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 26405.01 | 45988.55 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 26405.01 | 45988.55 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 28816.70 | |
| 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)..... | 0.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

RON DESANTIS FOR CONGRESS

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 0.00 | 0.00 |
| (ii) Unitemized..... | 0.00 | 0.00 |
| (iii) TOTAL of contributions from individuals ▶ | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 5000.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 0.00 | 5000.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 0.00 | 5000.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 26405.01 | 45988.55 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 22.23 | 22.23 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 22.23 | 22.23 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 26427.24 | 46010.78 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 55243.94 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 0.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 55243.94 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 26427.24 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 28816.70 |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 5 OF 14 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address P O BOX 650448 | | Amount of Each Disbursement this Period 1516.66 |
| City DALLAS State TX Zip Code 75265 | Purpose of Disbursement SHIPPING, MEALS, OFFICE SUPPLIES | Transaction ID : SB17.8916 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. US POST OFFICE | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 130 CORRIDOR ROAD | | Amount of Each Disbursement this Period 450.00 |
| City PONTE VEDRA State FL Zip Code 32082 | Purpose of Disbursement POSTAGE | Transaction ID : SB17.8916.0 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. CHICK-FIL-A | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 1752 US HIGHWAY 19 | | Amount of Each Disbursement this Period 300.83 |
| City ST AUGUSTINE State FL Zip Code 32084 | Purpose of Disbursement MEALS FOR SIGN WAIVERS | Transaction ID : SB17.8916.5 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1516.66 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 6 OF 14 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. US POST OFFICE | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 130 CORRIDOR ROAD | | Amount of Each Disbursement this Period 307.90 |
| City PONTE VEDRA | State FL | |
| Zip Code 32082 | Purpose of Disbursement POSTAGE | Transaction ID : SB17.8916.6 |
| Candidate Name | 001 Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Jeanne Boggs | | Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2012 |
| Mailing Address 1709 Country Club Drive | | Amount of Each Disbursement this Period 1000.00 |
| City Tallahassee | State FL | |
| Zip Code 32301 | Purpose of Disbursement SOCIAL MEDIA SUPPORT SERVICES | Transaction ID : SB17.8926 |
| Candidate Name | 001 Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. RONALD D DESANTIS | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address PO BOX 405 | | Amount of Each Disbursement this Period 259.60 |
| City PONTE VEDRA BEACH | State FL | |
| Zip Code 32004 | Purpose of Disbursement REIMBURSE FOR AIRLINE TICKET | Transaction ID : SB17.8911 |
| Candidate Name | 002 Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 06 | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1259.60 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|--------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 14 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Priceline.com | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 800 Connecticut Avenue | | Amount of Each Disbursement this Period 259.60 |
| City Norwalk State CT Zip Code 06854 | Purpose of Disbursement AIRLINE TICKET 002 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : SB17.8911.0 [MEMO ITEM] |
| State: District: | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. RONALD D DESANTIS | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 |
| Mailing Address PO BOX 405 | | Amount of Each Disbursement this Period 1650.71 |
| City PONTE VEDRA BEACH State FL Zip Code 32004 | Purpose of Disbursement REIMB FOR RENTAL CAR FEES 002 Category/Type | |
| Candidate Name | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : SB17.8927 |
| State: FL District: 06 | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. HERTZ RENTAL CAR | | Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012 |
| Mailing Address 2400 YANKEE CLIPPER DR | | Amount of Each Disbursement this Period 1650.71 |
| City JACKSONVILLE State FL Zip Code 32218 | Purpose of Disbursement RENTAL CAR FEES 002 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Transaction ID : SB17.8927.0 [MEMO ITEM] |
| State: District: | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1650.71 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|--------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 14 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. RONALD D DESANTIS | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address PO BOX 405 | | Amount of Each Disbursement this Period 482.91 |
| City PONTE VEDRA BEACH | State FL | |
| Zip Code 32004 | Purpose of Disbursement REIMB -POSTAGE, FUEL & PARKING | Transaction ID : SB17.8928 |
| Candidate Name | Category/ Type 002 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 06 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Gate | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address 10970 US Hwy 1 North | | Amount of Each Disbursement this Period 83.60 |
| City Ponte Vedra | State FL | |
| Zip Code 32081 | Purpose of Disbursement FUEL | Transaction ID : SB17.8928.3 [MEMO ITEM] |
| Candidate Name | Category/ Type 002 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. US POST OFFICE | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address 130 CORRIDOR ROAD | | Amount of Each Disbursement this Period 20.60 |
| City PONTE VEDRA | State FL | |
| Zip Code 32082 | Purpose of Disbursement POSTAGE | Transaction ID : SB17.8928.5 [MEMO ITEM] |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 482.91 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 14 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. US POST OFFICE | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address 130 CORRIDOR ROAD | | Amount of Each Disbursement this Period 46.35 |
| City PONTE VEDRA | State FL | |
| Zip Code 32082 | Purpose of Disbursement POSTAGE | Transaction ID : SB17.8928.6 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. US POST OFFICE | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address 130 CORRIDOR ROAD | | Amount of Each Disbursement this Period 102.10 |
| City PONTE VEDRA | State FL | |
| Zip Code 32082 | Purpose of Disbursement POSTAGE | Transaction ID : SB17.8928.7 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Double S Consulting, LLC | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 810-1 St. Michael Street | | Amount of Each Disbursement this Period 4000.00 |
| City Tallahassee | State FL | |
| Zip Code 32301 | Purpose of Disbursement FUNDRAISING CONSULTING FEE | Transaction ID : SB17.8912 |
| Candidate Name | 003 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 14 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Kessler Creative | | Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012 |
| Mailing Address 12276 San Jose Blvd, Ste 115 | | Amount of Each Disbursement this Period 574.00 Transaction ID : SB17.8929 |
| City Jacksonville State FL Zip Code 32223 | Purpose of Disbursement MAILINGS Candidate Name Category/Type 003 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Brendan O'Hara | | Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012 |
| Mailing Address 18 Estey Street | | Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.8914 |
| City St. Augustine State FL Zip Code 32084 | Purpose of Disbursement FUNDRAISING CONSULTING FEE Candidate Name Category/Type 003 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. ROBINSON HANKS YOUNG & ROBERTS PA | | Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012 |
| Mailing Address 133 S HARBOR DRIVE | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.8918 |
| City VENICE State FL Zip Code 34285 | Purpose of Disbursement ACCOUNTING SERVICES Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4074.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 11 OF 14 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

A. Signs Now

Full Name (Last, First, Middle Initial)
Mailing Address 1711 Lakeside Avenue

City St. Augustine State FL Zip Code 32084

Purpose of Disbursement YARD SIGNS Category/Type 004

Candidate Name

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2012

Amount of Each Disbursement this Period: 466.40

Transaction ID : SB17.8917

B. THE GULA GRAHAM GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 499 S CAPITOL ST SW STE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FUNDRAISING CONSULTING FEE Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 07 / 2012

Amount of Each Disbursement this Period: 6550.00

Transaction ID : SB17.8922

C. THE GULA GRAHAM GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 499 S CAPITOL ST SW STE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement REIMB FOR FEDEX SHIPPING Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 07 / 2012

Amount of Each Disbursement this Period: 154.34

Transaction ID : SB17.8924

SUBTOTAL of Disbursements This Page (optional) 7170.74

TOTAL This Period (last page this line number only)

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

| | | | | |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 14 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | | | | | | | | | | | |
|--|---|--|---------|---------|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) A. TPS Consulting, LLC | | Date of Disbursement | | | | | | | | | | |
| Mailing Address 116 Alsace Court | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>27</td> <td></td> <td>2012</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 11 | | 27 | | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 11 | | 27 | | 2012 | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | |
| Ponte Vedra beach | FL | 32082 | | | | | | | | | | |
| Purpose of Disbursement FUNDRAISING CONSULTING FEE | <table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type | | 003 | | | | | | | | | |
| 003 | | | | | | | | | | | | |
| Candidate Name | Amount of Each Disbursement this Period <table border="1"> <tr> <td>6000.00</td> </tr> </table> Transaction ID : SB17.8913 | | 6000.00 | | | | | | | | | |
| 6000.00 | | | | | | | | | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | |
| State: | District: | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|--|-----|---------|-----|---|---------|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement | | | | | | | | | | |
| Mailing Address | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | M M | / | D D | / | Y Y Y Y | | | | | |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | |
| | | | | | | | | | | | | |
| Purpose of Disbursement | <table border="1"> <tr> <td></td> </tr> </table> Category/ Type | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Candidate Name | Amount of Each Disbursement this Period <table border="1"> <tr> <td></td> </tr> </table> | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | |
| State: | District: | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|--|-----|---------|-----|---|---------|--|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement | | | | | | | | | | |
| Mailing Address | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | M M | / | D D | / | Y Y Y Y | | | | | |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | |
| | | | | | | | | | | | | |
| Purpose of Disbursement | <table border="1"> <tr> <td></td> </tr> </table> Category/ Type | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Candidate Name | Amount of Each Disbursement this Period <table border="1"> <tr> <td></td> </tr> </table> | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Office Sought: | 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)..... | <table border="1"> <tr> <td>6000.00</td> </tr> </table> | 6000.00 |
| 6000.00 | | |
| TOTAL This Period (last page this line number only)..... | <table border="1"> <tr> <td>26154.62</td> </tr> </table> | 26154.62 |
| 26154.62 | | |

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

| | | | | |
|---|--------------------------------------|------------------------------------|--|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 13 OF 14 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input checked="" type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
RON DESANTIS FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. RONALD D DESANTIS | | Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012 |
| Mailing Address PO BOX 405 | | Amount of Each Disbursement this Period 22.23 Transaction ID : SB19A.8959 |
| City PONTE VEDRA BEACH | State FL | |
| Zip Code 32004 | Purpose of Disbursement loan repayment | Category/ Type |
| Candidate Name RON DESANTIS FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 06 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | 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: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | 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)..... | 22.23 |
| TOTAL This Period (last page this line number only)..... | 22.23 |

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4228

RON DESANTIS FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2012

RONALD D DESANTIS

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 405

City

State

ZIP Code

PONTE VEDRA BEACH

FL

32004

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100.00

100.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

01

17

2012

N/A

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

0.00

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

0.00

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