

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

People for Pinellas

ADDRESS (number and street) P. O. Box 173207

Check if different than previously reported. (ACC) Tampa FL 33672

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

C C00582239

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day  Primary (12P)  General (12G)  Runoff (12R)
- PRE-Election Report for the:  Convention (12C)  Special (12S)

Election on 11 / 08 / 2016 in the State of FL

- (d) 30-Day  General (30G)  Runoff (30R)  Special (30S)
- POST-Election Report for the:

Election on   /   /   in the State of  

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Watkins, Michael, I., ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Watkins, Michael, I., , [Electronically Filed] Date 10 / 27 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

People for Pinellas

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

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date       |
|--|--|---|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2016"/>  |  | <input type="text" value="105945.63"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="198902.13"/> |   |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="625000.00"/> | <input type="text" value="1014000.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="823902.13"/> | <input type="text" value="1119945.63"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="249959.51"/> | <input type="text" value="546003.01"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="573942.62"/> | <input type="text" value="573942.62"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>      |   |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**People for Pinellas**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 525000.00                     | 914000.00                         |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 525000.00                     | 914000.00                         |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 100000.00                     | 100000.00                         |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 625000.00                     | 1014000.00                        |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 625000.00                     | 1014000.00                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 625000.00                     | 1014000.00                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 17140.49                      | 193770.91                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 17140.49                      | 193770.91                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 232819.02                     | 352232.10                         |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 249959.51                     | 546003.01                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 249959.51                     | 546003.01                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 625000.00                             | 1014000.00                                |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 625000.00                             | 1014000.00                                |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 17140.49                              | 193770.91                                 |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 17140.49                              | 193770.91                                 |

**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 6 OF 17  |
| <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)  
**People for Pinellas**

**A. Duke Energy**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 14042

|                        |             |                   |
|------------------------|-------------|-------------------|
| City<br>St. Petersburg | State<br>FL | Zip Code<br>33733 |
|------------------------|-------------|-------------------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 13    | / | 2016        |

**Transaction ID : SA11AI.4242**

Amount of Each Receipt this Period  
100000.00

Memo Item

**B. Edwards, William, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 2nd Street, N. Suite 1600

|                        |             |                   |
|------------------------|-------------|-------------------|
| City<br>St. Petersburg | State<br>FL | Zip Code<br>33701 |
|------------------------|-------------|-------------------|

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

|  |                                       |
|--|---------------------------------------|
| Name of Employer (for Individual)<br>The Edwards Group | Occupation (for Individual)<br>c.e.o. |
|--|---------------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 11    | / | 2016        |

**Transaction ID : SA11AI.4235**

Amount of Each Receipt this Period  
50000.00

Memo Item

**C. Florida Power & Light Company**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 Universe Blvd.

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Juno Beach | State<br>FL | Zip Code<br>33408 |
|--------------------|-------------|-------------------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    | / | 06    | / | 2016        |

**Transaction ID : SA11AI.4218**

Amount of Each Receipt this Period  
250000.00

Memo Item

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 400000.00 |
| <b>TOTAL</b> 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: (check only one)   | PAGE 7 OF 17 |
|   | <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)  
**People for Pinellas**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MacDougald, James, E., ,**

Mailing Address 400 Beach Drive, N.E., #2806

|                        |             |                   |
|------------------------|-------------|-------------------|
| City<br>St. Petersburg | State<br>FL | Zip Code<br>33701 |
|------------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>n/a | Occupation (for Individual)<br>retired |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 06    |   | 2016        |

**Transaction ID : SA11AI.4216**

Amount of Each Receipt this Period  
50000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Sembler, Mel, F., ,**

Mailing Address 5858 Central Avenue

|                        |             |                   |
|------------------------|-------------|-------------------|
| City<br>St. Petersburg | State<br>FL | Zip Code<br>33707 |
|------------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>The Sembler Company | Occupation (for Individual)<br>real estate developer |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 06    |   | 2016        |

**Transaction ID : SA11AI.4219**

Amount of Each Receipt this Period  
25000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Third Lake Capital, LLC**

Mailing Address 100 N. Tampa Street, #4000

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>Tampa | State<br>FL | Zip Code<br>33602 |
|---------------|-------------|-------------------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2016        |

**Transaction ID : SA11AI.4266**

Amount of Each Receipt this Period  
50000.00

Memo Item

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 125000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 525000.00 |

**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 8 OF 17  |
| <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)  
**People for Pinellas**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. American Society of Anesthesiologists PAC**

Mailing Address 1061 American Lane

City Schaumburg State IL Zip Code 60173

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  | / | 15  | / | 2016    |

**Transaction ID : SA11C.4264**

Amount of Each Receipt this Period  
100000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     | / |     | / |         |

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     | / |     | / |         |

Amount of Each Receipt this Period

Memo Item

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 100000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 100000.00 |

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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 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)

**People for Pinellas**

Full Name (Last, First, Middle Initial)

**A. Ashby Law, PLLC**

Mailing Address 717 Princess Street

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 11    |   | 2016      |

FEC Identification Number

C

**Transaction ID : SB21B.4234**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Election Connections, Inc.**

Mailing Address P. O. Box 10866

City  
Tallahassee

State  
FL

Zip Code  
32302

Purpose of Disbursement  
surveys

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 05    |   | 2016      |

FEC Identification Number

C

**Transaction ID : SB21B.4215**

Amount of Each Disbursement this Period

2283.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. Election Connections, Inc.**

Mailing Address P. O. Box 10866

City  
Tallahassee

State  
FL

Zip Code  
32302

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 10    |   | 2016      |

FEC Identification Number

C

**Transaction ID : SB21B.4233**

Amount of Each Disbursement this Period

6539.91

Memo Item

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

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

9823.28

**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"/> 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)

**People for Pinellas**

Full Name (Last, First, Middle Initial)

**A. Florida Finance Strategies, LLC**

Mailing Address 111-B E. College Avenue

City  
Tallahassee

State  
FL

Zip Code  
32301

Purpose of Disbursement  
fundraising expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 14 |   |   | 2016 |   |   |   |

FEC Identification Number

C

**Transaction ID : SB21B.4240**

Amount of Each Disbursement this Period

1010.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. i360, LLC**

Mailing Address P. O. Box 37046

City  
Baltimore

State  
MD

Zip Code  
21297

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 12 |   |   | 2016 |   |   |   |

FEC Identification Number

C

**Transaction ID : SB21B.4239**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Media Ad Ventures, Inc.**

Mailing Address 8136 Old Keene Mill Road  
Suite A-300

City  
Springfield

State  
VA

Zip Code  
22152

Purpose of Disbursement  
media placement-not disseminated

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 06 |   |   | 2016 |   |   |   |

FEC Identification Number

C

**Transaction ID : SB21B.4225**

Amount of Each Disbursement this Period

12113.80

Memo Item

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

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

15124.78

**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"/> 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)

**People for Pinellas**

Full Name (Last, First, Middle Initial)

**A. Patchwork Creative, LLC**

Mailing Address 1320 N. Courthouse Road  
Suite 130

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
media production-see Line 23

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 11 / 2016

FEC Identification Number

**Transaction ID : SB21B.4247**  
Amount of Each Disbursement this Period  
 -1951.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. Patchwork Creative, LLC**

Mailing Address 1320 N. Courthouse Road  
Suite 130

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
media production-see Line 23

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 12 / 2016

FEC Identification Number

**Transaction ID : SB21B.4252**  
Amount of Each Disbursement this Period  
 -1951.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. Patchwork Creative, LLC**

Mailing Address 1320 N. Courthouse Road  
Suite 130

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
media production-see Line 23

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 14 / 2016

FEC Identification Number

**Transaction ID : SB21B.4257**  
Amount of Each Disbursement this Period  
 -3903.79

Memo Item

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

-7807.57

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

17140.49

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>People for Pinellas</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00582239                 </div> |
|---|---|

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Extensive Enterprises</b>   | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 10 / 10 / 2016 |
| Mailing Address 204 37th Avenue, N.<br>Suite 182  | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 1000.00   |
| City State Zip Code<br>St. Petersburg FL 33704  |   |
| Purpose of Expenditure<br>online advertising-also opposes Crist   |   |
| Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Jolly, David W., ,  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate<br>District: 13 State: FL   |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 298759.28 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶   |

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>James R. Foster &amp; Associates, Inc.</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 10 / 18 / 2016 |
| Mailing Address 6832 Bonaparte Court  | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 20665.25  |
| City State Zip Code<br>Plano TX 75024   |   |
| Purpose of Expenditure<br>direct mail services  |   |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, ,  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate<br>District: 13 State: FL   |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 352232.10 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶   |

|  |  |
|--|--|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶   | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> 21665.25 |
| <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>          |
| <b>(a) TOTAL</b> Independent Expenditures ..... ▶                  | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>          |

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

Signature Watkins, Michael, I., , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
People for Pinellas
FEC IDENTIFICATION NUMBER
C C00582239

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Memo Item
Media Ad Ventures, Inc.
Mailing Address 8136 Old Keene Mill Road Suite A-300
City Springfield State VA Zip Code 22152
Purpose of Expenditure media placement Category/Type
Date of Public Distribution/Dissemination 10/06/2016
Amount 25323.00
Transaction ID : SE.4223
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: Support Oppose
Crist, Charlie Joseph, ,
Office Sought: House District: 13
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 154736.08
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Memo Item
Media Ad Ventures, Inc.
Mailing Address 8136 Old Keene Mill Road Suite A-300
City Springfield State VA Zip Code 22152
Purpose of Expenditure media placement Category/Type
Date of Public Distribution/Dissemination 10/10/2016
Amount 143023.20
Transaction ID : SE.4231
Date of Disbursement or Obligation 10/06/2016

Name of Federal Candidate: Support Oppose
Crist, Charlie Joseph, ,
Office Sought: House District: 13
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 297759.28
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 168346.20
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

Watkins, Michael, I.,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>People for Pinellas</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00582239</span> </div> |
|---|---|

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

|   |  |  |
|---|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Patchwork Creative, LLC</b>   |  | Date of Public Distribution/Dissemination<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br><span style="font-size: 1.2em;">10 / 11 / 2016</span> |
| Mailing Address 1320 N. Courthouse Road<br>Suite 130  |  | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">2500.00</span> </div>                              |
| City<br>Arlington   | State<br>VA  |  |
| Zip Code<br>22201   | Transaction ID : <b>SE.4245</b><br>Date of Disbursement or Obligation<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br><span style="font-size: 1.2em;">10 / 11 / 2016</span> |  |
| Purpose of Expenditure<br>media production  |  | Category/Type <span style="border: 1px solid black; display: inline-block; width: 40px; height: 15px;"></span>   |
| Name of Federal Candidate:<br>Crist, Charlie Joseph, , ,  |  | Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>  |
| Calendar Year-To-Date<br>Per Election for Office Sought   |  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶ _____              |
| <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">301259.28</span> </div> |  |  |

|   |  |  |
|---|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Patchwork Creative, LLC</b>   |  | Date of Public Distribution/Dissemination<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br><span style="font-size: 1.2em;">10 / 11 / 2016</span> |
| Mailing Address 1320 N. Courthouse Road<br>Suite 130  |  | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">1951.89</span> </div>                              |
| City<br>Arlington   | State<br>VA  |  |
| Zip Code<br>22201   | Transaction ID : <b>SE.4248</b><br>Date of Disbursement or Obligation<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br><span style="font-size: 1.2em;">10 / 11 / 2016</span> |  |
| Purpose of Expenditure<br>media production  |  | Category/Type <span style="border: 1px solid black; display: inline-block; width: 40px; height: 15px;"></span>   |
| Name of Federal Candidate:<br>Crist, Charlie Joseph, , ,  |  | Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>  |
| Calendar Year-To-Date<br>Per Election for Office Sought   |  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2016 <input type="checkbox"/> Other (specify) ▶ _____              |
| <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">303211.17</span> </div> |  |  |

|  |   |
|--|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶   | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">4451.89</span> </div> |
| <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>       |
| <b>(a) TOTAL</b> Independent Expenditures ..... ▶                  | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>       |

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

*Watkins, Michael, L.,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>People for Pinellas</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00582239                 </div> |
|---|---|

Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

|  |  |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Patchwork Creative, LLC</b>                                      | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 12 / 2016                 </div>                             |
| Mailing Address 1320 N. Courthouse Road<br>Suite 130   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     2500.00                 </div>   |
| City Arlington State VA Zip Code 22201   | <b>Transaction ID : SE.4253</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 11 / 2016                 </div> |
| Purpose of Expenditure media production Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>          | Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, , , Office Sought: <input checked="" type="checkbox"/> House District: 13<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: FL       |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 305711.17 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016<br><input type="checkbox"/> Other (specify) ▶  |

|  |  |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Patchwork Creative, LLC</b>                                      | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 14 / 2016                 </div>                             |
| Mailing Address 1320 N. Courthouse Road<br>Suite 130   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     5000.00                 </div>   |
| City Arlington State VA Zip Code 22201   | <b>Transaction ID : SE.4261</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 11 / 2016                 </div> |
| Purpose of Expenditure media production Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>          | Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, , , Office Sought: <input checked="" type="checkbox"/> House District: 13<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: FL       |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 310711.17 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016<br><input type="checkbox"/> Other (specify) ▶  |

|  |  |
|--|--|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶   | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     7500.00                 </div> |
| <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     0.00                 </div>    |
| <b>(a) TOTAL</b> Independent Expenditures ..... ▶                  | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     7500.00                 </div> |

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

Signature Watkins, Michael, I., , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>People for Pinellas</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00582239                 </div> |
|---|---|

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

|  |  |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Patchwork Creative, LLC</b>  | Date of Public Distribution/Dissemination<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>10 / 12 / 2016  |
| Mailing Address 1320 N. Courthouse Road<br>Suite 130   | Amount<br><div style="border: 1px solid black; padding: 2px; width: 100%;">                     1951.89                 </div> Transaction ID : <b>SE.4250</b><br>Date of Disbursement or Obligation<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>10 / 12 / 2016 |
| City State Zip Code<br>Arlington VA 22201  |  |
| Purpose of Expenditure<br>media production   |  |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, , ,   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate<br>District: 13 State: FL  |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; width: 100%;">                     312663.06                 </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016<br><input type="checkbox"/> Other (specify) ▶  |

|  |  |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Patchwork Creative, LLC</b>  | Date of Public Distribution/Dissemination<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>10 / 14 / 2016  |
| Mailing Address 1320 N. Courthouse Road<br>Suite 130   | Amount<br><div style="border: 1px solid black; padding: 2px; width: 100%;">                     3903.79                 </div> Transaction ID : <b>SE.4258</b><br>Date of Disbursement or Obligation<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>10 / 14 / 2016 |
| City State Zip Code<br>Arlington VA 22201  |  |
| Purpose of Expenditure<br>media production   |  |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, , ,   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate<br>District: 13 State: FL  |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; width: 100%;">                     331566.85                 </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016<br><input type="checkbox"/> Other (specify) ▶  |

|  |  |
|--|--|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶   | <div style="border: 1px solid black; padding: 2px; width: 100%;">                 5855.68             </div>               |
| <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;">                 [Empty]             </div> |
| <b>(a) TOTAL</b> Independent Expenditures ..... ▶                  | <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;">                 [Empty]             </div> |

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

Signature Watkins, Michael, I., , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>People for Pinellas</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00582239                 </div> |
|---|---|

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Strategic Digital Services, Inc.</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 04 / 2016                 </div>  |
| Mailing Address 1700 N. Monroe Street<br>Suite 11-111   | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">10000.00</span> </div> Transaction ID : <b>SE.4206</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 03 / 2016                 </div> |
| City Tallahassee State FL Zip Code 32303  |   |
| Purpose of Expenditure online advertising Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>                         |   |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, , ,          | Office Sought: <input checked="" type="checkbox"/> House District: 13<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: FL   |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">129413.08</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016<br><input type="checkbox"/> Other (specify) ▶   |

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Strategic Digital Services, Inc.</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 12 / 2016                 </div>  |
| Mailing Address 1700 N. Monroe Street<br>Suite 11-111   | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">15000.00</span> </div> Transaction ID : <b>SE.4255</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span><br/>                     10 / 12 / 2016                 </div> |
| City Tallahassee State FL Zip Code 32303  |   |
| Purpose of Expenditure online advertising Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>                         |   |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Crist, Charlie Joseph, , ,          | Office Sought: <input checked="" type="checkbox"/> House District: 13<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: FL   |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">327663.06</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016<br><input type="checkbox"/> Other (specify) ▶   |

|  |   |
|--|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶   | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">25000.00</span> </div>  |
| <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;"> </span> </div>         |
| <b>(a) TOTAL</b> Independent Expenditures ..... ▶                  | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">232819.02</span> </div> |

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

Watkins, Michael, I., ,

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2016

Signature