

2011 JUL 29 AM 10:40

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
My AMERICA PAC

ADDRESS (number and street) 2150 1st Ave South
 Check if different than previously reported. (ACC) ST PETERSBURG | FL | 33701

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C00494799

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 PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period 07 / 01 / 2011 through 06 / 28 / 2011

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 Johnny J Bardine

Signature of Treasurer 

Date 07 / 28 / 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

11030641634

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

My America PAC

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2011

To:

MM / DD / YYYY
06 / 28 / 2011

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2011	0	0
(b) Cash on Hand at Beginning of Reporting Period.....	0	0
(c) Total Receipts (from Line 19).....	26,185.00	26,185.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	26,185.00	26,185.00
7. Total Disbursements (from Line 31).....	21,554.65	21,554.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4,630.35	4,630.35
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	0
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	50,685.00	50,685.00



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

11030641635

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

My America PAC

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2011

To:

MM / DD / YYYY
06 / 28 / 2011

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).....

26,185.00

26,185.00

(ii) Unitemized.....

0

0

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

26,185.00

26,185.00

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

26,185.00

26,185.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0

0

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0

0

11030641636

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	21,554.65	21,554.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	21,554.65	21,554.65
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21,554.65	21,554.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0	0

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	26,185.00	26,185.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26,185.00	26,185.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21,554.65	21,554.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21,554.65	21,554.65

11030641638

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 10

(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 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)

MyAmerica PAC, Inc.

Full Name (Last, First, Middle Initial)

A. Mrs. Leony

Mailing Address

4738 Rebble Brook Dr

City

Oldsmar

State

FL

Zip Code

34677

FEC ID number of contributing federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

25,000.00

Date of Receipt

02 / 11 / 2011

Amount of Each Receipt this Period

25,000.00

Full Name (Last, First, Middle Initial)

B. Mason Law P.L. Attorney At Law

Mailing Address

4592 Ulmerton Rd Ste 101

City

Clearwater

State

FL

Zip Code

33792

FEC ID number of contributing federal political committee.

C

Name of Employer

Mason Law

Occupation

attorney

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Hayden, Nina

Mailing Address

530 Gilman Place N

City

St. Petersburg

State

FL

Zip Code

33716

FEC ID number of contributing federal political committee.

C

Name of Employer

University of Tampa

Occupation

attorney

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

35.00

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

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

11030641639

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

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

FOR LINE NUMBER: PAGE **2** OF **10**

(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 type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. Crocher, Tracey D.

Mailing Address

8611 N. 11th St

City

Tampa,

State

FL

Zip Code

33604

FEC ID number of contributing federal political committee.

C

Name of Employer

TOC Consulting Concepts

Occupation

CEO, Consulting

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

06 ' 21 ' 2011

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Tidmore, Sigrid

Mailing Address

3809 W. Corang St

City

Tampa

State

FL

Zip Code

33629

FEC ID number of contributing federal political committee.

C

Name of Employer

Self

Occupation

artist, non-profit activist

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

06 ' 21 ' 2011

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Boylan, Richard

Mailing Address

250 Isle Drive

City

St Pete Beach

State

FL

Zip Code

33706

FEC ID number of contributing federal political committee.

C

Name of Employer

Self

Occupation

Independent contractor

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

06 ' 21 ' 2011

Amount of Each Receipt this Period

35.00

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

120.00

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

120.00

11030641640

**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 3 OF 10
	<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 type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MyAmerica PAC

A. Full Name (Last, First, Middle Initial)
Okleren, Bonnie C.

Mailing Address
5950 Pelican Bay Plaza PH 1F

City **Gulfport** State **FL** Zip Code **33707**

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

Name of Employer **Laser Spine Inst.** Occupation **Registered Nurse**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **35.00**

Date of Receipt **06 / 21 / 2011**

Amount of Each Receipt this Period **35.00**

B. Full Name (Last, First, Middle Initial)
Baldwin, Melissa

Mailing Address
7403 Alafia Ridge Loop

City **Riverview** State **FL** Zip Code **33569**

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

Name of Employer **FL Conservation Alliance** Occupation **org organizer, non-profit**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **35.00**

Date of Receipt **06 / 21 / 2011**

Amount of Each Receipt this Period **35.00**

C. Full Name (Last, First, Middle Initial)
Fink, Edward

Mailing Address
2601 Roy Hanna Dr. South

City **St. Petersburg** State **FL** Zip Code **33712**

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

Name of Employer **self** Occupation **engineer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **35.00**

Date of Receipt **06 / 21 / 2011**

Amount of Each Receipt this Period **35.00**

SUBTOTAL of Receipts This Page (optional)..... **105.00**

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

11030641641

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

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

FOR LINE NUMBER: PAGE **4** OF **10**

(check only one)

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

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. *Stech, Tom*

Mailing Address

4775 Cove Circle #502

City

St. Pete

State

FL

Zip Code

33708

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

50.00

Name of Employer

TomKat Realty

Occupation

realtor

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Full Name (Last, First, Middle Initial)

B. *Cherney, Gordon*

Mailing Address

2621 Junnyside Circle

City

Palm Harbor

State

FL

Zip Code

34684

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

35.00

Name of Employer

Self

Occupation

insurance

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Full Name (Last, First, Middle Initial)

C. *Campbell, Diane*

Mailing Address

1601 S. Rome Ave

City

Tampa

State

FL

Zip Code

33606

FEC ID number of contributing federal political committee.

C

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

35.00

Name of Employer

unk.

Occupation

unk

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

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

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

115.00

11030641642

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

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

FOR LINE NUMBER: PAGE **5** OF 10

(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 type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

My America PAC

A. Full Name (Last, First, Middle Initial)
Knock, Robert

Mailing Address
707 CrossView Dr.

City **Tampa** State **FL** Zip Code **33602**

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

Name of Employer **unk** Occupation **analyst**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

06 ' 21 ' 2011

Amount of Each Receipt this Period

35.00

B. Full Name (Last, First, Middle Initial)
Maduro, Laura

Mailing Address
PO Box 25434

City **Tampa** State **FL** Zip Code **33622**

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

Name of Employer **Genesis Communications** Occupation **broadcasting**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

06 ' 21 ' 2011

Amount of Each Receipt this Period

35.00

c. Full Name (Last, First, Middle Initial)
Kleitsch, Sharon Joy

Mailing Address
1100 North Shore Dr. NE

City **St. Pete** State **FL** Zip Code **33701**

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

Name of Employer **self** Occupation **consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt

06 ' 21 ' 2011

Amount of Each Receipt this Period

35.00

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

105.00

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

105.00

11030641643

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

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

FOR LINE NUMBER: PAGE 6 OF 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. Florini, Glen

Mailing Address

1221 Kings Way Lane

City

Torpon Springs

State

FL

Zip Code

34688

FEC ID number of contributing federal political committee.

C

Name of Employer

self

Occupation

Consultant

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Nestor, JOANN

Mailing Address

2839 Countrybrook Dr. #23

City

Palm Harbor

State

FL

Zip Code

34684

FEC ID number of contributing federal political committee.

C

Name of Employer

Ruttenburg Homes

Occupation

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

06 / 11 / 2011

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. Nestor, John

Mailing Address

2839 Countrybrook Dr. #23

City

Palm Harbor

State

FL

Zip Code

34684

FEC ID number of contributing federal political committee.

C

Name of Employer

Ruttenburg Homes

Occupation

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

06 / 21 / 2011

Amount of Each Receipt this Period

35.00

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

105.00

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

105.00

11030641644

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

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

FOR LINE NUMBER: PAGE 7 OF 10
(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 type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
My America PAC

A. Full Name (Last, First, Middle Initial)
Baumgartner, Robert

Mailing Address
7516 Robindale Rd

City **Tampa** State **FL** Zip Code **33619**

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

Name of Employer **unk.** Occupation **legal guardian**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 ' 21 ' 2011

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Baumgartner, Janet

Mailing Address
7516 Robindale Rd.

City **Tampa** State **FL** Zip Code **33619**

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

Name of Employer **FL State Gov't** Occupation **paralegal**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 ' 21 ' 2011

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Robertson, Melanie

Mailing Address
1040 Golf Blvd.

City **Belleaire Blvd.** State **FL** Zip Code **33786**

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

Name of Employer **unk.** Occupation **unk.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 ' 21 ' 2011

Amount of Each Receipt this Period
35.00

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

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

105.00

11030641645

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

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

FOR LINE NUMBER: PAGE **8** OF **10**
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
My America PAC

A. Full Name (Last, First, Middle Initial)
Cof, Alain

Mailing Address
3351 N. Bath Club Blvd.

City **North Redington Bch.** State **FL** Zip Code **33703**

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

Name of Employer **unk** Occupation **Engineer**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **35.00**

Date of Receipt
06 / 21 / 2011

Amount of Each Receipt this Period
35.00

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

Mailing Address
1811 Ironwood Ct. W

City **Oldsmar** State **FL** Zip Code **34677**

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

Name of Employer **IBEW 824/Venon** Occupation **labor**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **35.00**

Date of Receipt
06 / 21 / 2011

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Morphy, Michael

Mailing Address
2701 S. Macdill

City **Tampa** State **FL** Zip Code **33629**

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

Name of Employer **Michael Morphy Gallery, self** Occupation **Artist**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **35.00**

Date of Receipt
06 / 01 / 2011

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **105.00**

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

11030641646

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

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

FOR LINE NUMBER: PAGE **9** OF **10**
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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)
My America PAC

A. Full Name (Last, First, Middle Initial)
Visco, Lisa

Mailing Address
2745 Tasha Dr.

City **Clearwater** State **FL** Zip Code **33761**

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

Name of Employer **unk** Occupation **attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 ' 21 ' 2011

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Mason, Joseph

Mailing Address
307 22nd St.

City **Bellevue Beach** State **FL** Zip Code **33786**

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

Name of Employer **unk** Occupation **unk**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 ' 21 ' 2011

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Ceri, Jacqueline

Mailing Address
351 N. Bath Club Blvd.

City **N. Redington Bch.** State **FL** Zip Code **33708**

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

Name of Employer **Polybak Inc.** Occupation **Secretary**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 ' 21 ' 2011

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **105.00**

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

11030641647

**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 10 OF 10
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
My America PAC

A. Full Name (Last, First, Middle Initial)
Mason, Charlotte

Mailing Address
307 22nd St.

City *Bellevue Bch.* State *FL* Zip Code *33781*

FEC ID number of contributing federal political committee. C

Name of Employer *UNK* Occupation *UNK*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35.00

Date of Receipt
06 / 21 / 2011

Amount of Each Receipt this Period
35.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... *35.00*

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

11030641648

**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 1 OF 16
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
My America PAC

Full Name (Last, First, Middle Initial) A. Novation Law Group		Date of Disbursement 03 '08 '2011
Mailing Address 2150 1st Ave S Suite 2		Amount of Each Disbursement this Period 500000
City St. Petersburg	State FL Zip Code 33712	
Purpose of Disbursement Legal compliance/Treasurer		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Vercher, Shawna		Date of Disbursement 03 '08 '2011
Mailing Address 2409 Williams Dr.		Amount of Each Disbursement this Period 2459.87
City Clearwater	State FL Zip Code 33764	
Purpose of Disbursement		Category/Type 001
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. Vercher, Shawna		Date of Disbursement 03 '15 '2011
Mailing Address 2409 Williams Dr.		Amount of Each Disbursement this Period 2459.87
City Clearwater	State FL Zip Code 33764	
Purpose of Disbursement		Category/Type 001
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).....	541974
TOTAL This Period (last page this line number only).....	

11030641649

**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 type="checkbox"/> 30b

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NAME OF COMMITTEE (If Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. U.S. Dept of Treasury (IRS)

Date of Disbursement

03 / 23 / 2011

Mailing Address

P.O. Box 12192

City

Covington, KY 41012-0192

Purpose of Disbursement

User Fee

Amount of Each Disbursement this Period

850.00

Candidate Name

001
Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Amazon.com

Date of Disbursement

03 / 25 / 2011

Mailing Address

City

State Zip Code

Purpose of Disbursement

Other - Vercher

Amount of Each Disbursement this Period

25396

Candidate Name

001
Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Vercher, Shawna

Date of Disbursement

03 / 28 / 2011

Mailing Address

2409 Williams Dr.

City

Clearwater FL 33764

Purpose of Disbursement

Amount of Each Disbursement this Period

2459.87

Candidate Name

001
Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

35638.3

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

11030641650

**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 3 OF 16

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A.

Mailing Address: My Fax

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: e-fax services

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 03 / 28 / 2011

Amount of Each Disbursement this Period: 10.00

Category/Type: 001

B.

Mailing Address: Amazon

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: other-vecher

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 04 / 04 / 2011

Amount of Each Disbursement this Period: 16.84

Category/Type: 001

C.

Mailing Address: Democratic Women on the Move
P.O. Box 8233

City: Seminole State: FL Zip Code: 33775

Purpose of Disbursement: contribution

Candidate Name: Bank charges

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 04 / 07 / 2011

Amount of Each Disbursement this Period: 30.00

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 56.84

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

11030641651

**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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
My America PAC

A.

Full Name (Last, First, Middle Initial)
Wachovia Bank

Date of Disbursement
04' 11' 2011

Mailing Address
2363 Gulf to Bay Blvd

City
Clearwater State
FL Zip Code
33765

Purpose of Disbursement
Bank Charges

Candidate Name

Amount of Each Disbursement this Period
8.00

Category/Type
001

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

State: District:

B.

Full Name (Last, First, Middle Initial)
Amazon.com

Date of Disbursement
04' 20' 2011

Mailing Address

City State Zip Code

Purpose of Disbursement
Other - Vercher

Candidate Name

Amount of Each Disbursement this Period
5.00

Category/Type
001

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Amazon.com

Date of Disbursement
04' 20' 2011

Mailing Address

City State Zip Code

Purpose of Disbursement
Other - Vercher

Candidate Name

Amount of Each Disbursement this Period
88.52

Category/Type
001

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

State: District:

SUBTOTAL of Disbursements This Page (optional)..... **215.2**

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

11030641652

**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 5 OF 16				
	<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

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NAME OF COMMITTEE (In Full)
My America PAC

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement 09 / 20 / 2011	
Mailing Address		Amount of Each Disbursement this Period 66.4	
City State Zip Code		Category/Type 001	
Purpose of Disbursement Other-vercher		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Rally Gas station		Date of Disbursement 09 / 21 / 2011	
Mailing Address		Amount of Each Disbursement this Period 48.44	
City State Zip Code		Category/Type 002	
Purpose of Disbursement Gas station-vercher		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. Exxon/Mobil Gas station		Date of Disbursement	
Mailing Address		Amount of Each Disbursement this Period 38.99	
City State Zip Code		Category/Type 002	
Purpose of Disbursement Gas-vercher		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).....	240.7
TOTAL This Period (last page this line number only).....	

11030641653

**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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
My America PAC

Full Name (Last, First, Middle Initial) My Fax		Date of Disbursement 04' 26' 2011
Mailing Address		Amount of Each Disbursement this Period 1.000
City	State Zip Code	
Purpose of Disbursement e-fax services	Category/Type 001	Amount of Each Disbursement this Period 1.000
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) Delta Air		Date of Disbursement 04' 27' 2011
Mailing Address		Amount of Each Disbursement this Period 239.40
City	State Zip Code	
Purpose of Disbursement Plane fare - Vercher	Category/Type 002	Amount of Each Disbursement this Period 239.40
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) Chevron Gas station		Date of Disbursement 04' 28' 2011
Mailing Address		Amount of Each Disbursement this Period 654.2
City	State Zip Code	
Purpose of Disbursement gas - vercher	Category/Type 002	Amount of Each Disbursement this Period 654.2
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).....	314.82
TOTAL This Period (last page this line number only).....	

11030641654

**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 9 OF 16

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. *UPS Store*

Date of Disbursement

05 / 02 / 2011

Mailing Address

City State Zip Code

Purpose of Disbursement

001
Category/
Type

Amount of Each Disbursement this Period

9951

Candidate Name

Postage

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. *Hazlett Creative Solutions*

Date of Disbursement

05 / 05 / 2011

Mailing Address

537-A 2nd Street N.

City State Zip Code

Purpose of Disbursement

003
Category/
Type

Amount of Each Disbursement this Period

750.00

Candidate Name

consulting fee

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. *Hess Gas Station*

Date of Disbursement

05 / 05 / 2011

Mailing Address

City State Zip Code

Purpose of Disbursement

002
Category/
Type

Amount of Each Disbursement this Period

5345

Candidate Name

gas-vercher

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

90296

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

11030641655

**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 8 OF 16

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. *Shell O.I*

Date of Disbursement

05 / *06* / *2011*

Mailing Address

City State Zip Code

Purpose of Disbursement

gas station - vercher

002
Category/
Type

Amount of Each Disbursement this Period

6087

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B. *Mjity Mo Design LLC*

Date of Disbursement

05 / *06* / *2011*

Mailing Address

433 Central Ave Ste. 209

City State Zip Code

St Pete FL 33701

Purpose of Disbursement

website logo design

001
Category/
Type

Amount of Each Disbursement this Period

50000

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C. *Delta Air*

Date of Disbursement

05 / *13* / *2011*

Mailing Address

City State Zip Code

Purpose of Disbursement

Luggage Check - vercher

002
Category/
Type

Amount of Each Disbursement this Period

2300

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

58387

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

11030641656

**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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
My America PAC,

A. Delta Air

Mailing Address

City State Zip Code

Purpose of Disbursement
Luggage Check-Vercher

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
08 / 06 / 2011

Amount of Each Disbursement this Period
25.00

B. Conrad Hotel

Mailing Address
1365 Brickell Avenue

City State Zip Code
Miami FL 33131

Purpose of Disbursement
Hotel stay-Vercher

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
05 / 05 / 2016

Amount of Each Disbursement this Period
269.52

C. AT&T Data

Mailing Address

City State Zip Code

Purpose of Disbursement
Wireless Internet-Vercher

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
05 / 18 / 2011

Amount of Each Disbursement this Period
25.00

SUBTOTAL of Disbursements This Page (optional)..... **319.52**

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

11030641657

**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 10 OF 16

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (If Full)

Full Name (Last, First, Middle Initial)

A. Intuit
Mailing Address

Date of Disbursement

05' 20' 2011

City State Zip Code

Purpose of Disbursement

Recurring Quickbooks
Candidate Name

00.1
Category/
Type

Amount of Each Disbursement this Period

186.00

24.95

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Mity Mo Design LLC
Mailing Address
433 Central Avenue Ste 209
City State Zip Code
St Pete FL 33701

Date of Disbursement

05' 23' 2011

Purpose of Disbursement

Design
Candidate Name

00.3
Category/
Type

Amount of Each Disbursement this Period

186.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Haddeth, Shari
Mailing Address
537-A 2nd St. N
City State Zip Code
St. Pete FL 33701

Date of Disbursement

05' 23' 2011

Purpose of Disbursement

Reimbursement
Candidate Name

00.3
Category/
Type

Amount of Each Disbursement this Period

86.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

296.95

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

11030641658

**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 11 OF 16

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. *My Fax*

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

001
Category/
Type

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

State: District:

Date of Disbursement

05 ' 26 ' 2011

Amount of Each Disbursement this Period

1.000

Full Name (Last, First, Middle Initial)

B. *Moby Mo Design LLC*

Mailing Address

433 Central Ave Ste 209
City State Zip Code

Purpose of Disbursement

Candidate Name

001
Category/
Type

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

State: District:

Date of Disbursement

05 ' 31 ' 2011

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. *Hazlett, Shari*

Mailing Address

537-A 2nd St
City State Zip Code

Purpose of Disbursement

Candidate Name

003
Category/
Type

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

State: District:

Date of Disbursement

05 ' 31 ' 2011

Amount of Each Disbursement this Period

4106

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

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

557.06

11030641659

**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 12 OF 16

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
For My America PAC

A. Full Name (Last, First, Middle Initial) **Hazlett, Shari**

Date of Disbursement **06, 08, 2011**

Mailing Address **537-A 2nd Street N.**

City **St. Pete** State **FL** Zip Code **33701**

Purpose of Disbursement **reimbursement** Category/Type **003**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period **5,196**

B. Full Name (Last, First, Middle Initial) **Loews Hotel Portofino Bay**

Date of Disbursement **06, 12, 2011**

Mailing Address **5601 Universal Blvd.**

City **Orlando** State **FL** Zip Code **32819**

Purpose of Disbursement **Hotel room - vercher** Category/Type **002**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period **7,499.4**

C. Full Name (Last, First, Middle Initial) **AT&T Data**

Date of Disbursement **06, 15, 2011**

Mailing Address

City State Zip Code

Purpose of Disbursement **wireless internet - vercher** Category/Type **002**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **▼**

State: District:

Amount of Each Disbursement this Period **2500**

SUBTOTAL of Disbursements This Page (optional)..... **1,032.90**

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

11030641660

**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 **13** OF **16**

<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 type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

My America PAC

Full Name (Last, First, Middle Initial)

A. Coews Hotel - Portofino Bay

Date of Disbursement

05 / 31 / 2011

Mailing Address

5601 Universal Boulevard

Orlando FL 32819

Purpose of Disbursement

Hotel room deposit - Vercher

002
Category/
Type

Amount of Each Disbursement this Period

201.38

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Bardine Johnny

Date of Disbursement

06 / 03 / 2011

Mailing Address

2150 1st Ave S Ste 2

St. Pete FL 33712

Purpose of Disbursement

Reimbursement

003
Category/
Type

Amount of Each Disbursement this Period

571.9

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Stuffed Mushroom

Date of Disbursement

06 / 07 / 2011

Mailing Address

825 Main Street

Safety Harbor, FL 34695

Purpose of Disbursement

Candidate Name

003
Category/
Type

Amount of Each Disbursement this Period

207.50

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

4660.7

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

11030641661

**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 14 OF 16
	<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 type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
My America PAC

A.

Full Name (Last, First, Middle Initial)
Amazon.com

Mailing Address
Amazon.com

City _____ State _____ Zip Code _____

Purpose of Disbursement
Other - Vercher

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement
08 / 16 / 2011

Amount of Each Disbursement this Period
12.86

Category/Type
001

B.

Full Name (Last, First, Middle Initial)
Creative Coating

Mailing Address
1911 N. 13th St W200

City **Tampa** State **FL** Zip Code **33605**

Purpose of Disbursement
venue rental ad purchase

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement
06 / 20 / 2011

Amount of Each Disbursement this Period
22500

Category/Type
004

C.

Full Name (Last, First, Middle Initial)
Creative Coating

Mailing Address
1911 N. 13th Street St W200

City **Tampa** State **FL** Zip Code **33605**

Purpose of Disbursement
FL

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement
06 / 19 / 2011

Amount of Each Disbursement this Period
4000

Category/Type
004

SUBTOTAL of Disbursements This Page (optional) **47786**

TOTAL This Period (last page this line number only) **47786**

11030641662

**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 15 OF 16
	<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 type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
My America PAC

A.

Full Name (Last, First, Middle Initial)
Quinbessence Catering

Date of Disbursement
06 / 21 / 2011

Mailing Address
1232 County Road 1

City
Dunedin FL 34698

Purpose of Disbursement
Catering

Candidate Name
003

Category/Type
003

Amount of Each Disbursement this Period
25750

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Creative Coating

Date of Disbursement
06 / 21 / 2011

Mailing Address
1911 N. 13th St

City
Tampa FL 33603

Purpose of Disbursement
venue rental

Candidate Name
003

Category/Type
003

Amount of Each Disbursement this Period
2000.0

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Barnes & Noble

Date of Disbursement
06 / 21 / 2011

Mailing Address
11802 N. Dale Mabry

City
Tampa FL 33618

Purpose of Disbursement
Bob Graham book purchase

Candidate Name
003

Category/Type
003

Amount of Each Disbursement this Period
73409

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... **119159**

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

11030641663

**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 <u>16</u> OF <u>16</u>
	<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 type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
My America PAC

A. Full Name (Last, First, Middle Initial) Intuit

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Disbursement 06 / 22 / 2011

Purpose of Disbursement Quickbooks Online-recurring Category/Type 001

Candidate Name _____

Amount of Each Disbursement this Period 24.95

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

State: _____ District: _____

B. Full Name (Last, First, Middle Initial) Vercher, Shanna

Mailing Address 2409 Williams Dr

City Clearwater State FL Zip Code 33764

Date of Disbursement 06 / 23 / 2011

Purpose of Disbursement Withdrawal - unknown Category/Type 001

Candidate Name _____

Amount of Each Disbursement this Period 6,261.05

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

State: _____ District: _____

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

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Disbursement _____

Purpose of Disbursement _____ Category/Type _____

Candidate Name _____

Amount of Each Disbursement this Period _____

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

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional)..... 6,286.00

TOTAL This Period (last page this line number only)..... 21,554.65

11030641664

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 9 OF 10
FOR LINE NUMBER: (check only one)

NAME OF COMMITTEE (In Full)
My America PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NGP

Nature of Debt (Purpose):
Online contribution software

Mailing Address
1101 15th St. NW Suite 500

City State Zip Code
Washington, D.C. 20005

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mity Mo Design, Inc.

Nature of Debt (Purpose):
website engine, website design, logo branding design, printed materials a design

Mailing Address
433 Central Ave, Suite 209

City State Zip Code
St. Petersburg, FL 33701

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hartzelt Creative Solutions, Inc.

Nature of Debt (Purpose):
consulting

Mailing Address
537-A 2nd St. N

City State Zip Code
St. Petersburg FL 33701

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page this line number only)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

11030641665

SUN COAST POLICE BENEVOLET ASSOCIATION, INC.

Telephone (727) 532-1722
Toll Free: 1-877-968-7722
FAX (727) 530-4816

Administrative Office
14141 46th Street N #1205
Clearwater, Florida 33762

St. Petersburg City Council Candidate Questions 2011

1. Please provide us with a brief biography of yourself, to include your qualifications, community service, and why you are seeking the office for City Council?
2. Please tell us about your platform of issues as a candidate for City Council.
3. As a member of City Council, what would you do to ensure St. Petersburg attracts the best candidates for employment as police officers?
4. The Police Department has a take home police cruiser program for officers living within a 40 mile radius. This program has extended the life of the vehicles to triple that of a fleet car. Would you support continuing this program?
5. Would you support a police promotional testing and evaluation process that is fair and objective to candidate officers/sergeants?
6. What do you believe is the primary roll of the Employee Relations Department in dealing with labor/management issues?
7. As a candidate, have you received the endorsement of any other organizations? If so, please tell us who they are?
8. Do you support keeping the Tampa Bay Rays in St. Petersburg? Would you exhaust all efforts to keep them here?
9. What is your position on defined contribution versus defined benefit plans as it relates to the City's retirement plans?
10. What is your opinion as it relates to the performance of the St. Petersburg Police Chief and his staff?

Mark Marland, President * George Lofton, Senior Vice President *
James "JD" Lofton, Executive Vice President Joseph Lehmann, Treasurer * Scott Brockew, Secretary *
Michael I. Krohn, Esquire, Executive Director
www.suncoastpba.com

11030641666



July 14, 2011

Charlie Gerdes
770 2 Ave S
St. Petersburg, FL. 33701

Dear Mr. Gerdes,

Since it is not possible for candidates to personally reach all of our St. Petersburg Police Department members, it has been our custom to invite candidates to meet with our **Political Screening Committee**, so that it may then make recommendations to our members. As an announced candidate for **CITY COUNCIL, DISTRICT 1**, we cordially invite you to meet with our Committee. Enclosed are the legislative questions that you will be asked to respond to. We have scheduled a **Screening Committee** meeting at the following location:

The Pinellas County Police Benevolent Association
14141 46th St Suite 1205
Clearwater, FL. 33762
727-532-1722
Friday, July 29, 2011.

Please call Tami at the PBA office to schedule a time on that date.

If you have any questions, please feel free to contact Tami at the PBA office 727- 532-1722 and she will be glad to answer any question that you might have.

Sincerely,

George Lofton
Senior Vice President

GL/TM

11030641667

Call Time

Scott Maddox - \$500
+ others

At the Lauderdale Conventions
\$2k

Bill McBride
Frank Fakes + Jim Burke
Terry Grett
Bill Tapp?
Gary Renko
Tony Saderfeld

[Tony Jones]

8 937 9050 BT 1

Saturday

9:30

Kopper Kitchen

Monday

11am?
11:30am?

PBA

defined benefit

what they've had retirement benefit

defined contrib

PBA interview

Aug 16th > LNW
Forum

City Hall 7pm
"St. Pete Decides"

Aug 24th > LNW
Pilgrim Congregational
Church

* Competitive wages/solo
- Strong/good ben. prog.
- protect/maintain Nat'l accreditation

- training/equip
send to none

* take home equiv? absolutely

* police provs/testing provs
that is fair... ->

(affirm
action
quest.)

yes!

exhaust
all efforts
to keep
pay
keep

support employees
& advocate for
employees

abuse way

administer
enforce fairly
objectively
consistently
(Comp. rel. dept.)

primary role of labor... ?

Neutral referee
not advocate for mgmt, but be neutral decision - make that
applies policies fairly & consistently

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

11030641669

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>fed Ex</i>	Shipping Date <i>7/28/11</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Signature] PREPARER *7/29/11*
DATE PREPARED