Image# 14978416651			_		PAGE 1 / 9
	EPORT OF F ND DISBURS Other Than An Author	SEMENT	S	Office LL	ne Only
1. NAME OF TYP	PE OR PRINT V	Example: If typi	ng, type		se Only
COMMITTEE (in full)		over the lines.		E4M5	
	ND; THE				
ADDRESS (number and street)	O BOX 9891				
Check if different than previously reported. (ACC)	ARLINGTON		VA	22219	<u> </u>
2. FEC IDENTIFICATION NUMB			STATE	■	ZIP CODE
C C00565739	3. IS RE		NEW (N) OR	AMENDED (A)	
(Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1)	Report Due On: Apr 2 (c) 12-Day	0 (M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE)	PRE-Election Report for the: Election	on Convention (Special (12S) 014	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (300	G) F	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on /		YYY	in the State of
5. Covering Period 10	01 / Y Y Y Y 01 2014	through		15 / Y Y 20	Y Y 14
I certify that I have examined this R Type or Print Name of Treasurer	eport and to the best of n	hy knowledge and	belief it is true, cor	rrect and comple	te.
Signature of Treasurer CALEB CL		[Electronicall	y Filed] Date	10 / D	
NOTE: Submission of false, erroneous	, or incomplete information	may subject the per	son signing this Re	port to the penalti	es of 2 U.S.C. §437g.
Office Use Only					FORM 3X Rev. 12/2004

10/16/2014 10 : 45

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISDURSEMENTS	Page 2
W	Irite or Type Committee Name		
F	FLORIDA MAJORITY FUND; TH	IE	
R	eport Covering the Period: From:	10 / D D / Y Y Y Y 10 01 2014	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		0.00
	(b) Cash on Hand at Beginning of Reporting Period	8000.00	
	(c) Total Receipts (from Line 19)	21000.00	29000.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	29000.00	29000.00
7.	Total Disbursements (from Line 31)	281.40	281.40
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28718.60	28718.60
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00]

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

DET	AILED SUMMARY PAGE	
FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Write or Type Committee Name		
FLORIDA MAJORITY FUND; THE		
M = M		M = M / D = D / Y = Y = Y
Report Covering the Period: From: 10	01 2014	To: 10 15 2014
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		1
(i) Itemized (use Schedule A)	16000.00	24000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	16000.00	24000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	5000.00	
(such as PACs)	5000.00	5000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21000.00	29000.00
12. Transfers From Affiliated/Other		7 7 7
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
	, , , , , , , , , , , , , , , , , , , ,	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))►	21000.00	29000.00
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►	21000.00	29000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4				
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
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	281.40	281.40				
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))►	281.40	281.40				
Transfers to Affiliated/Other Party		0.00				
Committees Contributions to Federal Candidates/Committees	0.00					
and Other Political Committees	0.00	0.00				
(use Schedule E) Coordinated Party Expenditures	0.00	0.00				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00				
	0.00	0.00				
(b) Political Party Committees(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				
Other Disbursements	0.00	0.00				
Federal Election Activity (2 U.S.C. §431(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				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	281.40	281.40				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	281.40	281.40				

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L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	21000.00	29000.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	21000.00	29000.00
 G. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	281.40	281.40
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	281.40	281.40

Image# 14978416656

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

9

TTEMIZED RECEIPTS		category of the Summary Page	X 11a 11b 11c 12										
Any information copied from such Repor	s and Statements may not be sold	d or used by any r		13 for the		14	15	16	17 utions				
or for commercial purposes, other than u													
NAME OF COMMITTEE (In Full)	ND; THE												
A. Full Name (Last, First, Middle Initial) Dane Andreeff Mailing Address 140 E St Lucia Ln	Dane Andreeff												
City	State Zip Code	e	10 06 2014 Transaction ID : SA11AI.4112										
Santa Rosa Beach	FL 32459						Receipt th		d				
FEC ID number of contributing federal political committee.	C					7		500	0.00				
Name of Employer	Occupation		C	Contribu	utio	n							
Maple Leaf Partners LP	Partner												
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	5000.00											
Full Name (Last, First, Middle Initial) B. Arthur Choate				Date o	of R	eceipt							
Mailing Address 1390 S Dixie Hwy Ste 2221				10 15 2014									
City	State Zip Code	е	Transaction ID : SA11AI.4114 Amount of Each Receipt this Period										
Coral Gables	FL 33146												
FEC ID number of contributing federal political committee.	C				_	7		500	0.00				
Name of Employer	Occupation		C	ontribu	itior	า							
Retired	Retired												
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	5000.00	1										
Full Name (Last, First, Middle Initial) C. Lothar Mayer						eceipt							
	Mailing Address 6009 Old Ocean Blvd						D / Y	2014	Y				
City Ocean Ridge	State Zip Code FL 33435	e					: SA11AI						
FEC ID number of contributing federal political committee.	C			Amoun	it of	f Each	Receipt th		0.00				
Name of Employer	Occupation		Contribution										
Retired	Retired												
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00]										
SUBTOTAL of Receipts This Page (opt	onal)					9		11000	0.00				

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

Image# 14978416657

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 7

OF

9

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17											
	ny information copied from such Reports and S for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full) FLORIDA MAJORITY FUND; T	HE													
A.				Date of Receipt											
	Mailing Address 3211 Ponce De Leon Blvd <u>Ste 301</u> City	State	Zip Code	10 02 2014											
	Coral Gables	FL	33134	Transaction ID : SA11AI.4110 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		5000.00											
	Name of Employer	Occupation													
	J. Milton & Associates Receipt For:	Vice Presid		_											
	Primary General Other (specify)	Aggregale	Year-to-Date ▼ 5000.00												
В.	Full Name (Last, First, Middle Initial)			Date of Receipt											
	Mailing Address														
	City	State	Zip Code	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С													
	Name of Employer	Occupation													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V												
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt											
0.	Mailing Address														
	City	State	Zip Code	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С													
	Name of Employer	Occupation		_											
	Receipt For: Primary General Other (specify) v		Year-to-Date ▼												
s	UBTOTAL of Receipts This Page (optional)		•	5000.00											

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

16000.00

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

9

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b X 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using	d Statements m the name and a	ay not be sold or used by any po address of any political committee	erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) FLORIDA MAJORITY FUND;	THE											
Full Name (Last, First, Middle Initial) A. NEXTERA ENERGY, INC. POLITIC		COMMITTEE	Date of Receipt									
Mailing Address 801 PENNSYLVANIA AVE SUITE 220	., NVV		10 09 2014									
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SA11C.4117 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C co	0064774	5000.00									
Name of Employer	Occupatior	1	Contribution									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00										
Full Name (Last, First, Middle Initial) B.	Date of Receipt											
Mailing Address			M M / D D / Y Y Y Y									
City	State	Zip Code	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer	Occupatior	1										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼										
Full Name (Last, First, Middle Initial)			Data of Dessint									
Mailing Address			Date of Receipt									
City	State	Zip Code										
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period									
Name of Employer	Occupatior	1										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼										
SUBTOTAL of Receipts This Page (optional)			5000.00									
TOTAL This Period (last page this line numb	er only)	······	5000.00									

SC	CHEDULE B (FEC Form 3X)							MBER:				PAGE	9	OF 9		
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c		k only 21b						25	26			
		Detailed	Summary Page			27		28a		28b		BC	29	30b		
	y information copied from such Reports and State for commercial purposes, other than using the na															
\backslash		_														
	FLORIDA MAJORITY FUND; THE	-														
_	Full Name (Last, First, Middle Initial)							Date of	: D:/	huron	mont					
А.	Campaign Merchant Services										_	Y	Y Y	Y		
	Mailing Address 611 Pennsylvania Ave SE #267						10 06 2014									
CityStateZip CodeWashingtonDC20003							Transaction ID : SB21B.4119									
	Purpose of Disbursement	DC	20003	-		_	-									
	Credit Card Processing Fees						4	Amount	of	Each	Disbur	seme	nt this	Period		
	Candidate Name			Cate T	egoi ype	ry/				,		,	23	4.50		
	Office Sought: House Disburse Senate	ement For: Primary	General													
	President	Other (spec	cify) 🔻													
	State: District: Full Name (Last, First, Middle Initial)															
В.	Campaign Merchant Services							Date of	Dis			V	YY	V		
	Mailing Address 611 Pennsylvania Ave SE #267						10 15 2014									
	City Washington	State DC	Zip Code 20003					Transaction ID : SB21B.4121								
	Purpose of Disbursement Credit Card Processing Fees				-		Amount of Each Disburseme					somo	nt this	Period		
	Candidate Name				egoi ype	gory/				46.90						
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General		<u>, , , , , , , , , , , , , , , , , , , </u>						,					
	State: District:		.,													
C.	Full Name (Last, First, Middle Initial)							Date of	Dis	sburse	ment					
	Mailing Address							M = M	/	D	D /	Y	ΥΥ	Y		
	City	State	Zip Code													
	Purpose of Disbursement															
Candidate Name					Category/ Type			Amount of Each Disbursement this Period								
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General									,				
	State: District:	 	•													
s	UBTOTAL of Disbursements This Page (optional).									,		,	28′	.40		
т	OTAL This Period (last page this line number only	/)								,		,	282	.40		

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