

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**RON DESANTIS FOR CONGRESS**

ADDRESS (number and street) PO Box 405  
 Check if different than previously reported. (ACC) PONTE VEDRA BEACH FL 32004

2. **FEC IDENTIFICATION NUMBER** C C00511568 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) FL 06

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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

Type or Print Name of Treasurer ERIC ROBINSON

Signature of Treasurer ERIC ROBINSON [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**RON DESANTIS FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	193295.63	813874.63
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2575.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	193295.63	811299.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	52341.53	240572.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	12641.24
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	52341.53	227931.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	652673.74	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**RON DESANTIS FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	101575.00	436705.00
(ii) Unitemized.....	33770.63	44254.63
(iii) TOTAL of contributions from individuals ▶	135345.63	480959.63
(b) Political Party Committees.....	0.00	10000.00
(c) Other Political Committees (such as PACs).....	57950.00	322915.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	193295.63	813874.63
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	500.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	12641.24
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	193295.63	827015.87

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52341.53	240572.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	1000.00	1000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	22.23
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	22.23
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2575.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2575.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	53341.53	244169.61

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	512719.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	193295.63
25. SUBTOTAL (add Line 23 and Line 24).....	706015.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53341.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	652673.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRANKLIN ADAMS**

Mailing Address 128 GOVERNORS RD

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.10566**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**ALBERT B AFTOORA**

Mailing Address 1211 CREEK VIEW WAY

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 12 / 2014

**Transaction ID : SA11AI.10814**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE ATANASOSKI**

Mailing Address 605 OCEAN SHORE BLVD

City State Zip Code  
ORMOND BEACH FL 32176

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

Name of Employer Occupation  
MICROFLEX INC VICE PRESIDENT

Receipt For: 2600  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.11971**

Amount of Each Receipt this Period  
2600.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE ATANASOSKI**

Mailing Address 605 OCEAN SHORE BLVD

City ORMOND BEACH State FL Zip Code 32176

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

Name of Employer MICROFLEX INC Occupation VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.11973**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**UMA BANERJEE**

Mailing Address 260 GARTH RD #3E4

City SCARSDALE State NY Zip Code 10583

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.12446**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Nicolas Beckwith**

Mailing Address 1 Little Lane

City Pittsburgh State PA Zip Code 15215

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

Name of Employer ARCH STREET MANAGEMENT LLC Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : SA11AI.10521**

Amount of Each Receipt this Period  
1000.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**John A Benning**

Mailing Address 2359 Alexander Palm Dr

City Naples State FL Zip Code 34105

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10540**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**RONNIE BLEDSOE**

Mailing Address P O BOX 1626

City ORMOND BEACH State FL Zip Code 32175

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11AI.10588**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**KAREN BOLLAN**

Mailing Address 1901 1ST STREET N #1301

City JACKSONVILLE BEACH State FL Zip Code 32250

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

Name of Employer REMAX Occupation REALTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10530**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD E BOPP**

Mailing Address 116 PEACHTREE CIR

City State Zip Code  
DAYTONA BEACH FL 32114

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 12 / 2014

**Transaction ID : SA11AI.10916**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**RAYMOND W BOUSHIE**

Mailing Address 124 LAUREL LANE

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 12 / 2014

**Transaction ID : SA11AI.10947**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Harry A Brandt**

Mailing Address 4711 Van Kleeck Drive

City State Zip Code  
New Smyrna Beach FL 32169

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.11970**

Amount of Each Receipt this Period  
2600.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANN BRENNAN**

Mailing Address **850 NELSONS WALK**

City **NAPLES** State **FL** Zip Code **34102**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 04 / 2014**

**Transaction ID : SA11AI.10547**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**KENNETH K CLEELAND**

Mailing Address **135 AVENUE DE LA MER #2**

City **PALM COAST** State **FL** Zip Code **32137**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : SA11AI.11424**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Luther W Coggin**

Mailing Address **PO Box 3499**

City **Ponte Vedra Beach** State **FL** Zip Code **32004**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : SA11AI.11069**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PATRICIA COLLIER**

Mailing Address 172 MURFIELD DR

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10636**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**M. STEVEN CROPPER**

Mailing Address 4237 SALISBURY RD #100

City State Zip Code  
JACKSONVILLE FL 32216

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10532**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**GARY DEKAY**

Mailing Address 39 PRINCE ANTHONY LANE

City State Zip Code  
PALM COAST FL 32164

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11AI.11953**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert L Delisio**

Mailing Address 13 Mohawk Drive

City State Zip Code  
Girard OH 44420

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

Name of Employer Occupation  
LMS Services Inc. Owner/President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : SA11AI.11593**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**JEFFREY J DEWIT**

Mailing Address 8631 W BRILES RD

City State Zip Code  
PEORIA AZ 85383

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

Name of Employer Occupation  
ECHO TRADE CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11AI.10606**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**SANDRA T DILLON**

Mailing Address 165 PLANTATION CIR S

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10538**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**TERRY LYNN DIXON**

Mailing Address 144 SEA ISLAND DR

City State Zip Code  
PONTE VEDRA FL 32082

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10662**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JEROME FALIC**

Mailing Address 209 BAL BAY DR

City State Zip Code  
BAL HARBOUR FL 33154

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

Name of Employer Occupation  
DUTY FREE AMERICA CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : SA11AI.10522**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**LUKE FICHTHORN III**

Mailing Address 430 COCONUT PALM RD

City State Zip Code  
VERO BEACH FL 32963

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.11590**

Amount of Each Receipt this Period  
250.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT FITZSIMMONS**

Mailing Address 1597 MASTERPIECE WAY

City State Zip Code  
DELAND FL 32724

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

Name of Employer Occupation  
GALLERY HOMES OF DELAND BUILDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.10685**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joseph G Fogg III**

Mailing Address 4295 Cutlass Lane

City State Zip Code  
Naples FL 34102

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

Name of Employer Occupation  
Westbury Partners Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10534**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Leslie K.S. Fogg**

Mailing Address 4295 Cutlass Lane

City State Zip Code  
Naples FL 34102

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

Name of Employer Occupation  
homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10535**

Amount of Each Receipt this Period  
2600.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN FOSS**

Mailing Address 235 LITTLE HARBOR LANE

City State Zip Code  
NAPLES FL 34102

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10536**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN FOSS**

Mailing Address 235 LITTLE HARBOR LANE

City State Zip Code  
NAPLES FL 34102

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10537**

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH GIBSON**

Mailing Address 5040 GLENBROOK TERR

City State Zip Code  
WASHINGTON DC 20016

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

Name of Employer Occupation  
THE GIBSON GROUP EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.12289**

Amount of Each Receipt this Period  
500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CAMERON GILREATH**

Mailing Address 1681 HUNTING CREEK DR

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation  
TIME WARNER VICE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11AI.12448**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**MITCH GLAZIER**

Mailing Address 7313 DURBIN TERR

City State Zip Code  
BETHESDA MD 20817

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

Name of Employer Occupation  
RECORDING INDUSTRY OF AMERICA ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11AI.12467**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**H PHILLIP GLAZNER**

Mailing Address 921 OLD MILL RUN

City State Zip Code  
ORMOND BEACH FL 32174

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : SA11AI.11241**

Amount of Each Receipt this Period  
**225.00**

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

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

**975.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MONTERRAT GOMEZ**

Mailing Address 1222 MOLOKAI RD

City JACKSONVILLE State FL Zip Code 32216

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : SA11AI.10560**

Amount of Each Receipt this Period  
**700.00**

**B.** Full Name (Last, First, Middle Initial)  
**TRAVIS GRANTHAM**

Mailing Address 2068 E TIFFANY CT

City GILBERT State AZ Zip Code 85298

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

Name of Employer **INTERNATIONAL AIR RESPONSE** Occupation **OPERATIONS CHIEF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : SA11AI.10610**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**THAD GULLIFORD**

Mailing Address 1037 5TH AVE N.

City NAPLES State FL Zip Code 34102

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

Name of Employer **PERE DEVELOPMENT** Occupation **DEVELOPER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 27 / 2014**

**Transaction ID : SA11AI.10516**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M HADDOW**

Mailing Address 13516 COMPTON RD

City State Zip Code  
CLIFTON VA 20124

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

Name of Employer Occupation  
UPSTREAM CONSULTING EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.10563**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard G Hana**

Mailing Address 6180 St Andrews Ct

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
Self Employed CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.10677**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Elvira F Hasty**

Mailing Address 187 Governors Rd

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10528**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Arthur Hayden**

Mailing Address 261 Plantation Circle South

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 25 / 2014**

**Transaction ID : SA11AI.10631**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Alan M Horton**

Mailing Address 7023 Greentree Drive

City State Zip Code  
Naples FL 34108

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

Name of Employer Occupation  
RETIRED Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : SA11AI.10520**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Paul S Horvath**

Mailing Address 106 Regents Place

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : SA11AI.11128**

Amount of Each Receipt this Period  
**250.00**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DAN HUCKS**

Mailing Address 4920 STATE RD 11

City State Zip Code  
DELEON SPRINGS FL 32130

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

Name of Employer Occupation  
TOTAL COMFORT BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.12148**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**JOSE Francisco Jimenez**

Mailing Address 116 Seven Iron Ct.

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10671**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH KAMINSKY**

Mailing Address 4930 COQUINA CROSSING DR

City State Zip Code  
ELKTON FL 32033

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : SA11AI.10583**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Kessler**

Mailing Address 12718 Cormorant Cove Lane

City Jacksonville State FL Zip Code 32223

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

Name of Employer Kessler Creative Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.12449**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Judy P Kukk**

Mailing Address 3660 Gin Lane

City Naples State FL Zip Code 34102

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : SA11AI.10519**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Julie Kukk**

Mailing Address 3535 Gordon Drive

City Naples State FL Zip Code 34102

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

Name of Employer Stoles, Sowers and Associates Occupation Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : SA11AI.10526**

Amount of Each Receipt this Period  
 1000.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**T.J. Kukk**

Mailing Address 3660 Gin Lane

City Naples State FL Zip Code 34102

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 28 / 2014

**Transaction ID : SA11AI.10518**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**CYNTHIA LAUTENBACH**

Mailing Address 1801 GALLEON DRIVE

City NAPLES State FL Zip Code 34102-7761

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.10561**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ned C Lautenbach**

Mailing Address 1801 Galleon Dr

City Naples State FL Zip Code 34102

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.10562**

Amount of Each Receipt this Period  
 2500.00

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRANCES LOCKWOOD**

Mailing Address 123 PLEASANT ST #202

City State Zip Code  
MARBLEHEAD MA 01945

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11AI.10554**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN LOCKWOOD**

Mailing Address 123 PLEASANT ST #202

City State Zip Code  
MARBLEHEAD MA 01945

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

Name of Employer Occupation  
SJ LOCKWOOD & COMPANY LLC CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11AI.10556**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN Thomas Mackelfresh**

Mailing Address 231 Bentley Dr

City State Zip Code  
Naples FL 34110

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11AI.10543**

Amount of Each Receipt this Period  
500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Joshua D Mahan**

Mailing Address 6229 Utah Ave NW

City Washington State DC Zip Code 20015

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

Name of Employer US DOJ Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.12095**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**ANDREA MAIL**

Mailing Address 2737 BEAUCLERC RD

City JACKSONVILLE State FL Zip Code 32257

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.12443**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Gino L Maini**

Mailing Address 716 Green Rd

City New Smyrna Beach State FL Zip Code 32168

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2014

**Transaction ID : SA11AI.11781**

Amount of Each Receipt this Period  
 500.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CATHERYN MARTIN**

Mailing Address 1514 N HALIFAX DR

City State Zip Code  
DAYTONA BEACH FL 32118

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : SA11AI.11320**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**RONALD G MAUGERI**

Mailing Address 475 FENTRESS BLVD #M

City State Zip Code  
DAYTONA BEACH FL 32114

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

Name of Employer Occupation  
INTERNATION TILE & STONE PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : SA11AI.10592**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**LARRY MCCARROLL**

Mailing Address 4525 S ATLANTIC AVE #1606

City State Zip Code  
PONCE INLET FL 32127

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

Name of Employer Occupation  
US AIRWAYS PILOT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : SA11AI.11625**

Amount of Each Receipt this Period  
**300.00**

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

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

**1400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILL G MERRILL Jr.**

Mailing Address 108 QUEENS WAY

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10655**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Matthew H Merritt**

Mailing Address 841 Baytree Lane

City State Zip Code  
Ponte Vedra FL 32082

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

Name of Employer Occupation  
Self Employed Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10666**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**H. WILLIAM MONTOYA**

Mailing Address 236 PONTE VEDRA PARK DR #101

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
MONTOYA & ASSOCIATES EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.12311**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN H MORRIS Jr.**

Mailing Address 106 MUIRFIELD DR

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.10565**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**LUCAS J NARDUCCI**

Mailing Address 4390 E GEMINI PLACE

City State Zip Code  
CHANDLER AZ 85249

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

Name of Employer Occupation  
POLSINELLI LAW FIRM ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11AI.10604**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Russell B Newton Jr**

Mailing Address PO Box 52898

City State Zip Code  
Jacksonville FL 32201

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

Name of Employer Occupation  
Timucuan Asset Mgmt Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11AI.10514**

Amount of Each Receipt this Period  
2600.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DAWN D NICHOLS**

Mailing Address 1040 JOHN ANDERSON DR

City ORMOND BEACH State FL Zip Code 32176

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

Name of Employer NICHOLS & AHMED Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11AI.10510**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**ELLEN M OBRIEN**

Mailing Address 102 LANDS END

City PONTE VEDRA State FL Zip Code 32082

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10632**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**FRANCES C OBRIEN**

Mailing Address P O BOX 3023

City PONTE VEDRA BEACH State FL Zip Code 32004

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10647**

Amount of Each Receipt this Period  
125.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LYNNE Z OTROK**

Mailing Address 182 SEA HAMMOCK WAY

City State Zip Code  
PONTE VEDRA FL 32082

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

Name of Employer Occupation  
SQUARE A INC ADMIN ASST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11AI.10527**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**ROBB PENOYER**

Mailing Address 41A SARAGOSSA ST

City State Zip Code  
ST AUGUSTINE FL 32084

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

Name of Employer Occupation  
SELF EMPLOYED SOFTWARE ENGINEER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 19 / 2014

**Transaction ID : SA11AI.10580**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN T PERRY**

Mailing Address 148 BOWEN RD

City State Zip Code  
WHITE GA 30184

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

Name of Employer Occupation  
STERLING COMMERCIAL PROPERTY REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 20 / 2014

**Transaction ID : SA11AI.11604**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PELLEGRINO P PORRARO**

Mailing Address 157 PLANTATION CIR S

City State Zip Code  
PONTE VEDRA FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 25 / 2014

**Transaction ID : SA11AI.10649**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**MCGEHEE PORTER III**

Mailing Address 313 PABLO RD

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2014

**Transaction ID : SA11AI.11412**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN ROOD**

Mailing Address 3030 HARTLEY RD #310

City State Zip Code  
JACKSONVILLE FL 32257

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

Name of Employer Occupation  
VESTCOR CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11AI.12435**

Amount of Each Receipt this Period  
2600.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KATHLEEN ROONEY**

Mailing Address **2660 S BIRMINGHAM AVE**

City **TULSA** State **OK** Zip Code **74114**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 28 / 2014**

**Transaction ID : SA11Al.10525**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**RAY ROSS**

Mailing Address **5011 GATE PKWY**

City **JACKSONVILLE** State **FL** Zip Code **32256**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : SA11Al.10621**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**CAYCE RUMSEY**

Mailing Address **333 SAN JUAN DR**

City **PONTE VEDRA BEACH** State **FL** Zip Code **32082**

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

Name of Employer **PONTE VEDRA PLASTIC SURGERY** Occupation **SURGEON**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : SA11Al.10766**

Amount of Each Receipt this Period  
**2000.00**

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

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

**4850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANGELA SANDERS**

Mailing Address 561 WHISPERING PINE LANE

City State Zip Code  
NAPLES FL 34103

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

Name of Employer Occupation  
INTERGRATED SOLUTION GROUP LLC EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 15 / 2014

**Transaction ID : SA11AI.10498**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN SANDERS**

Mailing Address 561 WHISPERING PINE LANE

City State Zip Code  
NAPLES FL 34103

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

Name of Employer Occupation  
TURF ENTERPRISES INC EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 15 / 2014

**Transaction ID : SA11AI.10500**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**HENRY R SCANLON**

Mailing Address 837 PONTE VEDRA BLVD

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.12157**

Amount of Each Receipt this Period  
2600.00

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GAIL N SCHNEIDER**

Mailing Address 820 FAIRWAY DR

City State Zip Code  
NEW SMYRNA BEACH FL 32168

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11AI.12171**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**RHODA K SHEFFIELD**

Mailing Address 131 NEAL RD

City State Zip Code  
HAWTHORNE FL 32640

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11AI.12350**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Glenn E Sisler**

Mailing Address 120 Retreat Place

City State Zip Code  
Ponte Vedra FL 32082

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10529**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Charles B Skinner Jr**

Mailing Address 76 San Juan Dr

City State Zip Code  
Ponte Vedra FL 32082

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

Name of Employer Occupation  
Self Employed Forestry

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10644**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CHRISS SPIRES Jr.**

Mailing Address 16 MARIA PLACE

City State Zip Code  
PONTE VEDRA FL 32082

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

Name of Employer Occupation  
MONTROYA & ASSOCIATES FINANCIAL ADVISORS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10669**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**TODD STEGGERDA**

Mailing Address 19590 SARATOGA SPRINGS PL

City State Zip Code  
ASHBURN VA 20147

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

Name of Employer Occupation  
WILMERHALE LLP ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11AI.10508**

Amount of Each Receipt this Period  
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID M STRICKLAND**

Mailing Address 9020 MARSH VIEW CT

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation  
EVERBANK BANKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2014

**Transaction ID : SA11AI.11820**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Maria E Sullivan**

Mailing Address 261 Patrick Mill Cir

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
The Sontag Foundation Program Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : SA11AI.10568**

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
**KERMIT SUTTON**

Mailing Address 715 10th STREET SOUTH

City State Zip Code  
NAPLES FL 34102

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

Name of Employer Occupation  
SEF-EMPLOYED INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11AI.10544**

Amount of Each Receipt this Period  
2600.00

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

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

3225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT TANSOR**

Mailing Address **4829 S ATLANTIC AVE**

City **PONCE INLET** State **FL** Zip Code **32127**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : SA11AI.11430**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**KARRIN TAYLOR**

Mailing Address **7600 E DOUBLETREE RANCH RD #300**

City **SCOTTSDALE** State **AZ** Zip Code **85258**

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

Name of Employer **DMB ASSOCIATES** Occupation **REALTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : SA11AI.10624**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**DONALD J TRUMP**

Mailing Address **725 5TH AVE**

City **NEW YORK** State **NY** Zip Code **10022**

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

Name of Employer **SELF EMPLOYED** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11AI.12450**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Roger Margie Vasey</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 3580 gin lane		<b>Transaction ID : SA11AI.10558</b>
City naples	State FL	
Zip Code 34102		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. SANDRA F VASEY</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 3580 GIN LANE		<b>Transaction ID : SA11AI.10559</b>
City NAPLES	State FL	
Zip Code 34102		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. PETER J WAKEMAN</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 1450 N HALIFAX AVE		<b>Transaction ID : SA11AI.11239</b>
City DAYTONA BEACH	State FL	
Zip Code 32118		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Bart A Walchle**

Mailing Address 1506 Roberts Drive

City Jacksonville State FL Zip Code 32250

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

Name of Employer Self Employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10661**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lewis C. Walker**

Mailing Address 24621Harbour View Drive

City Ponte Vedra Beach State FL Zip Code 32082

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.10682**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**PATRICIA WALKER**

Mailing Address 24621 HARBOUR VIEW DR

City PONTE VEDRA State FL Zip Code 32082

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : SA11AI.10680**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>GERALD WARD</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 7 COLLINGVILLE CT		<b>Transaction ID : SA11AI.10672</b>
City PALM COAST	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RET	Occupation AIRLINE PILOT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>TIMOTHY D WARE</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 680 PONTE VEDRA BLVD		<b>Transaction ID : SA11AI.10664</b>
City PONTE VEDRA BEACH	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF EMPLOYED	Occupation DENTIST	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Thomas Wheeler</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 1221 GULF SHORE BLVD #502		<b>Transaction ID : SA11AI.10505</b>
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer RETIRED	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Wheeler**

Mailing Address 1221 GULF SHORE BLVD #502

City Naples State FL Zip Code 34102

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

Name of Employer RETIRED Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 22 / 2014

**Transaction ID : SA11AI.10506**

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
**CHAD WILLEMS**

Mailing Address 16604 N 108TH ST

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer SUMMIT CONSULTING GROUP INC Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 14 / 2014

**Transaction ID : SA11AI.10577**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jean Ruth Winters**

Mailing Address 181 Sea Hammock Way

City Ponte Vedra Beach State FL Zip Code 32082

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11AI.10652**

Amount of Each Receipt this Period  
150.00

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

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

2800.00

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

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

FOR LINE NUMBER: PAGE 40 OF 83  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM YOUNG**

Mailing Address 833 KALLI CREEK LANE

City ST AUGUSTINE State FL Zip Code 32080

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.11595**

Amount of Each Receipt this Period  
 250.00

**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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

101575.00

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

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

FOR LINE NUMBER: PAGE 41 OF 83  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

**A.** Mailing Address PALLADIAN 1  
220 LEIGH FARM RD  
City DURHAM State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11C.12532

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

**B.** Mailing Address 1505 PRINCE STREET  
SUITE 300  
City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

Transaction ID : SA11C.10573

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

**C.** Mailing Address 1625 PRINCE STREET  
SUITE 225  
City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11C.12466

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... 7000.00  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 42 OF 83  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
AZOA SERVICES CORPORATION POLITICAL ACTION COMMITTEE (ALLIANZ OF AMERICA PAC)

A. Mailing Address 1101 CONNECTICUT AVE., NW  
SUITE 950

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00095109

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11C.12292

Amount of Each Receipt this Period  
 700.00

B. Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILEDELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014

Transaction ID : SA11C.11606

Amount of Each Receipt this Period  
 500.00

C. Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILEDELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014

Transaction ID : SA11C.11611

Amount of Each Receipt this Period  
 2000.00

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

3200.00

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

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

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

FOR LINE NUMBER: PAGE 43 OF 83  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**COVIDIEN (U.S.) POLITICAL ACTION COMMITTEE**

Mailing Address 701 8TH STREET NW SUITE 620

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00433490

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12469**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**COX ENTERPRISES PAC (COXPAC) INC.**

Mailing Address 975 F STREET, NW SUITE 300

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : SA11C.12271**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION**

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12428**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EAGLE FORUM PAC**

Mailing Address P.O. BOX 618

City ALTON State IL Zip Code 62002

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2014

**Transaction ID : SA11C.12039**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE**

Mailing Address 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00342394

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11C.11610**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**FAEGREBD PAC**

Mailing Address 300 N. MERIDIAN STREET  
SUITE 2700

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00386904

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2014

**Transaction ID : SA11C.12274**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FAMILY PAC**

Mailing Address 1001 LIBERTY AVENUE  
SUITE 850

City Pittsburg State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00336842

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11C.10541**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12429**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**I-PAC JAX INC**

Mailing Address 6944 ST AUGUSTINE ROAD SUITE D

City Jacksonville State FL Zip Code 32217

FEC ID number of contributing federal political committee. **C** C00557926

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11C.10512**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

**A.** Mailing Address 412 FIRST STREET, SE, SUITE 300

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12301**

Amount of Each Receipt this Period  
 2000.00

Full Name (Last, First, Middle Initial)  
**JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE**

**B.** Mailing Address ONE JOHNSON & JOHNSON PLAZA

City NEW BRUNSWICK State NJ Zip Code 08933

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12297**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

**C.** Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 8000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : SA11C.10667**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LIBERTY MUTUAL INSURANCE COMPANY - PAC**

Mailing Address **175 BERKELEY STREET**

City **BOSTON** State **MA** Zip Code **02117**

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12299**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)**

Mailing Address **P.O. BOX 75000  
MC2250**

City **DETROIT** State **MI** Zip Code **48275**

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 04 / 2014**

**Transaction ID : SA11C.10550**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)**

Mailing Address **P.O. BOX 75000  
MC2250**

City **DETROIT** State **MI** Zip Code **48275**

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12296**

Amount of Each Receipt this Period  
**1000.00**

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

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

**5000.00**

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

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

FOR LINE NUMBER: PAGE 48 OF 83  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF HOME BUILDERS**

Mailing Address 15TH & M STREETS NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C70002712**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11C.10619**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N MICHIGAN AVENUE

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C C70002563**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12295**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL SHORTHAND REPORTERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 8224 OLD COURTHOUSE ROAD

City State Zip Code  
VIENNA VA 22182

FEC ID number of contributing federal political committee. **C C00146506**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014

**Transaction ID : SA11C.10848**

Amount of Each Receipt this Period  
 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS POLITICAL ACTION COMMITTEE

Mailing Address **ONE NATIONWIDE PLAZA, 1-32-301**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00406215**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12300**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address **51 MADISON AVENUE  
ROOM 1109**

City **NEW YORK** State **NY** Zip Code **10010**

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12304**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

Mailing Address **8700 WEST BRYN MAWR  
SUITE 1200S**

City **CHICAGO** State **IL** Zip Code **60631**

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 20 / 2014**

**Transaction ID : SA11C.11608**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12528**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SAFEGUARDING AMERICAN LIBERTIES MORALS & OPPORTUNITIES NOW (SALMON) PAC**

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00534032

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11C.10615**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**STEPTOE AND JOHNSON LLP POLITICAL ACTION COMMITTEE**

Mailing Address 1330 CONNECTICUT AVENUE NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00431858

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12302**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THE CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC**

Mailing Address 15 MOUNTAIN VIEW ROAD

City WARREN State NJ Zip Code 07059

FEC ID number of contributing federal political committee. **C** C00229203

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12534**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE**

Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12480**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**THE RECORDING INDUSTRY ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1025 F STREET NW  
10TH FLOOR

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00009357

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12472**

Amount of Each Receipt this Period  
 1000.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THE TRAVELERS COMPANIES INC. PAC**

Mailing Address **ONE TOWER SQUARE**

City **HARTFORD** State **CT** Zip Code **06183**

FEC ID number of contributing federal political committee. **C C00376376**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12305**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**TIME WARNER INC. PAC**

Mailing Address **800 CONNECTICUT AVE., NW  
SUITE 1200**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00339291**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12294**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC**

Mailing Address **9800 FREDERICKSBURG ROAD**

City **SAN ANTONIO** State **TX** Zip Code **78288**

FEC ID number of contributing federal political committee. **C C00164145**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11C.12477**

Amount of Each Receipt this Period  
**2500.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

**A. UNIVERSAL MUSIC GROUP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
UNIVERSAL MUSIC GROUP POLITICAL ACTION COMMITTEE

Mailing Address 2220 COLORADO AVENUE

City SANTA MONICA State CA Zip Code 90404

FEC ID number of contributing federal political committee. **C** C00392464

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11C.11607**

Amount of Each Receipt this Period  
 1000.00

**B. ZOETIS GOOD GOVERNMENT FUND**

Full Name (Last, First, Middle Initial)  
ZOETIS GOOD GOVERNMENT FUND

Mailing Address 701 8TH ST, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00541177

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12309**

Amount of Each Receipt this Period  
 2500.00

**C. ZURICH HOLDING COMPANY OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)**

Full Name (Last, First, Middle Initial)  
ZURICH HOLDING COMPANY OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)

Mailing Address 1201 F STREET NW

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00235036

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11C.12473**

Amount of Each Receipt this Period  
 2000.00

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

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

5500.00

57950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address P O BOX 650448		Amount of Each Disbursement this Period 3532.39
City DALLAS State TX Zip Code 75265	Purpose of Disbursement TRAVEL, POSTAGE COSTS 002 Category/Type	
Candidate Name		Transaction ID : SB17.10449
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 24.00
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.10449.0 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 60 MASSACHUSETTS AVE NE		Amount of Each Disbursement this Period 590.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement TRAIN TICKETS-TRAVEL COSTS 002 Category/Type	
Candidate Name		Transaction ID : SB17.10449.1 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3532.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2014
Mailing Address 208 S. AKARD ST		Amount of Each Disbursement this Period 148.47
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CELL PHONE CHARGES	
Candidate Name	Category/Type 001	Transaction ID : SB17.10449.5 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. US SENATE SHOP</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2014
Mailing Address FIRST STREET SE		Amount of Each Disbursement this Period 1139.00
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type 001	Transaction ID : SB17.10449.6 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. POSTMASTER</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 16.80
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type 003	Transaction ID : SB17.10449.8 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 389.28
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement FOOD FOR EVENT/MEETING	Transaction ID : SB17.10449.9
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BULL FEATHERS RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 410 1ST STREET SE		Amount of Each Disbursement this Period 62.85
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEAL FOR MEETING	Transaction ID : SB17.10449.11
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address P O BOX 660108		Amount of Each Disbursement this Period 127.62
City DALLAS	State TX	
Zip Code 75266	Purpose of Disbursement CELL PHONE CHARGES	Transaction ID : SB17.10449.12
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address P O BOX 650448		Amount of Each Disbursement this Period 2038.79
City DALLAS State TX Zip Code 75265	Purpose of Disbursement POSTAGE, CELL PHONE CHARGES, TRAVEL 001 Category/Type	
Candidate Name		Transaction ID : SB17.10475
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 247.18
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement POSTAGE 003 Category/Type	
Candidate Name		Transaction ID : SB17.10475.1 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 208 S. AKARD ST		Amount of Each Disbursement this Period 148.47
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CELL PHONE CHARGES 001 Category/Type	
Candidate Name		Transaction ID : SB17.10475.2 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2038.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BEST BUY</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 9355 ATLANTIC BLVD		Amount of Each Disbursement this Period 1155.57
City JACKSONVILLE State FL Zip Code 32244	Purpose of Disbursement COMPUTER EQUIPMENT-OFFICE	
Candidate Name	Category/Type 001	Transaction ID : SB17.10475.3 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Amazon.com</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 410 Terry Avenue North		Amount of Each Disbursement this Period 35.18
City Seattle State WA Zip Code 98109	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type 001	Transaction ID : SB17.10475.4 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address P O BOX 660108		Amount of Each Disbursement this Period 127.73
City DALLAS State TX Zip Code 75266	Purpose of Disbursement CELL PHONE CHARGES	
Candidate Name	Category/Type 001	Transaction ID : SB17.10475.6 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US SENATE SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address FIRST STREET SE		Amount of Each Disbursement this Period 274.25
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.10475.7
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address P O BOX 650448		Amount of Each Disbursement this Period 2061.30
City DALLAS	State TX	
Zip Code 75265	Purpose of Disbursement TRAVEL, POSTAGE, UTILITIES, MEALS	Transaction ID : SB17.10690
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JET BLUE AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 118-29 QUEENS BLVD		Amount of Each Disbursement this Period 500.88
City FOREST HILLS	State NY	
Zip Code 11375	Purpose of Disbursement AIRLINE TICKETS	Transaction ID : SB17.10690.0
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2061.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 208 S. AKARD ST		Amount of Each Disbursement this Period 178.70
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CELL PHONE CHARGES	
Candidate Name		Transaction ID : SB17.10690.1 <b>[MEMO ITEM]</b>
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 277.75
City Washington State DC Zip Code 20003	Purpose of Disbursement FOOD FOR MEETING	
Candidate Name		Transaction ID : SB17.10690.4 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Amazon.com</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 410 Terry Avenue North		Amount of Each Disbursement this Period 33.90
City Seattle State WA Zip Code 98109	Purpose of Disbursement OFFICE SUPPLIES-TONER/INK	
Candidate Name		Transaction ID : SB17.10690.5 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. GODADDY.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 14455 N HAYDEN RD		Amount of Each Disbursement this Period 95.76
City SCOTTSDALE	State AZ	
Purpose of Disbursement WEBSITE SUPPORT FEES	Zip Code 85260	Transaction ID : SB17.10690.6 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address P O BOX 660108		Amount of Each Disbursement this Period 134.02
City DALLAS	State TX	
Purpose of Disbursement CELL PHONE CHARGES	Zip Code 75266	Transaction ID : SB17.10690.7 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gate</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 10970 US Hwy 1 North		Amount of Each Disbursement this Period 83.75
City Ponte Vedra	State FL	
Purpose of Disbursement MEALS	Zip Code 32081	Transaction ID : SB17.10690.8 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Shell</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 195 Corridor Road		Amount of Each Disbursement this Period 50.89
City Ponte Vedra	State FL	
Zip Code 32082	Purpose of Disbursement FUEL	Transaction ID : SB17.10690.10
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 75.28
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement FOOD FOR MEETING	Transaction ID : SB17.10690.11
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. POSTMASTER</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 51.60
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement POSTAGE	Transaction ID : SB17.10690.12
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 195 Corridor Road		Amount of Each Disbursement this Period 32.38
City Ponte Vedra	State FL	
Zip Code 32082	Purpose of Disbursement FUEL	Transaction ID : SB17.10690.13
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HERTZ RENTAL CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 2400 YANKEE CLIPPER DR		Amount of Each Disbursement this Period 159.04
City JACKSONVILLE	State FL	
Zip Code 32218	Purpose of Disbursement RENTAL CAR FEES	Transaction ID : SB17.10690.15
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address P O BOX 650448		Amount of Each Disbursement this Period 2910.72
City DALLAS	State TX	
Zip Code 75265	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.12481
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2910.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HERTZ RENTAL CAR</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 2400 YANKEE CLIPPER DR		Amount of Each Disbursement this Period 222.35
City JACKSONVILLE State FL Zip Code 32218	Purpose of Disbursement RENTAL CAR CHARGES 002 Category/Type	
Candidate Name		Transaction ID : SB17.12481.0 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 300 First St SE		Amount of Each Disbursement this Period 654.28
City Washington State DC Zip Code 20003	Purpose of Disbursement FOOD & BEV FOR EVENT 007 Category/Type	
Candidate Name		Transaction ID : SB17.12481.2 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fed Ex</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 9802-16 Baymeadows Blvd		Amount of Each Disbursement this Period 4.01
City Jacksonville State FL Zip Code 32256	Purpose of Disbursement SHIPPING COST 001 Category/Type	
Candidate Name		Transaction ID : SB17.12481.3 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 128.35
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement POSTAGE Category/Type 001	
Candidate Name		Transaction ID : SB17.12481.4 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gate</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 10970 US Hwy 1 North		Amount of Each Disbursement this Period 141.10
City Ponte Vedra State FL Zip Code 32081	Purpose of Disbursement MEALS Category/Type 002	
Candidate Name		Transaction ID : SB17.12481.6 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BEST BUY</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 9355 ATLANTIC BLVD		Amount of Each Disbursement this Period 534.99
City JACKSONVILLE State FL Zip Code 32244	Purpose of Disbursement COMPUTER EQUIPMENT-OFFICE EXPENSE Category/Type 001	
Candidate Name		Transaction ID : SB17.12481.7 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 208 S. AKARD ST		Amount of Each Disbursement this Period 148.70
City DALLAS State TX Zip Code 75202	Purpose of Disbursement CELL PHONE CHARGES	
Candidate Name		Transaction ID : SB17.12481.8 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. GODADDY.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 14455 N HAYDEN RD		Amount of Each Disbursement this Period 143.64
City SCOTTSDALE State AZ Zip Code 85260	Purpose of Disbursement WEBSITE SERVICES-HOSTING FEE	
Candidate Name		Transaction ID : SB17.12481.11 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Amazon.com</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 410 Terry Avenue North		Amount of Each Disbursement this Period 39.35
City Seattle State WA Zip Code 98109	Purpose of Disbursement OFFICE EQUIPMENT	
Candidate Name		Transaction ID : SB17.12481.12 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address P O BOX 660108		Amount of Each Disbursement this Period 624.09
City DALLAS State TX Zip Code 75266	Purpose of Disbursement CELL PHONE CHARGES 001 Category/Type	
Candidate Name		Transaction ID : SB17.12481.14 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. DAYTONA CHECKERED FLAG COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 220 S RIDGEWOOD AVE #220		Amount of Each Disbursement this Period 5250.00
City DAYTONA BEACH State FL Zip Code 32114	Purpose of Disbursement FUNDRAISING EXPENSE 003 Category/Type	
Candidate Name		Transaction ID : SB17.10496
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. GEER SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 301 WEST BAY ST STE 460		Amount of Each Disbursement this Period 45.00
City JACKSONVILLE State FL Zip Code 32202	Purpose of Disbursement WEBSITE HOSTING FEE 001 Category/Type	
Candidate Name		Transaction ID : SB17.10493
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5295.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kessler Creative</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 12276 San Jose Blvd, Ste 115		Amount of Each Disbursement this Period 230.50 <b>Transaction ID : SB17.12279</b>
City Jacksonville State FL Zip Code 32223	Purpose of Disbursement PRINTING EXPENSE-BUMPER STICKERS Category/Type 006	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kessler Creative</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address 12276 San Jose Blvd, Ste 115		Amount of Each Disbursement this Period 212.00 <b>Transaction ID : SB17.12280</b>
City Jacksonville State FL Zip Code 32223	Purpose of Disbursement PRINTING EXPENSE-BUMPER STICKERS Category/Type 006	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 212.50 <b>Transaction ID : SB17.10502</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	655.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 83		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 212.50 <b>Transaction ID : SB17.10503</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : SB17.10507</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 42.50 <b>Transaction ID : SB17.10515</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	265.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 212.50 <b>Transaction ID : SB17.10552</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : SB17.10575</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : SB17.10579</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	233.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : SB17.10582</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 4.26 <b>Transaction ID : SB17.10626</b>
City San Francisco	State CA	
Purpose of Disbursement		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 95.63 <b>Transaction ID : SB17.10668</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2014		
Mailing Address 85 Natoma Street			Amount of Each Disbursement this Period 83.95		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.10674		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>			Date of Disbursement MM / DD / YYYY 02 / 27 / 2014		
Mailing Address 85 Natoma Street			Amount of Each Disbursement this Period 1.06		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.10687		
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>			Date of Disbursement MM / DD / YYYY 03 / 04 / 2014		
Mailing Address 85 Natoma Street			Amount of Each Disbursement this Period 0.10		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.10713		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	85.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 1.06 <b>Transaction ID : SB17.10716</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 1.06 <b>Transaction ID : SB17.10719</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 2.13 <b>Transaction ID : SB17.10722</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 1.06 <b>Transaction ID : SB17.10725</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 9.57 <b>Transaction ID : SB17.10728</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 104.97 <b>Transaction ID : SB17.10736</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	115.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 17.01 <b>Transaction ID : SB17.11585</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 21.25 <b>Transaction ID : SB17.11592</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 23.38 <b>Transaction ID : SB17.11594</b>
City San Francisco	State CA	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	61.64
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 28.89
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	<b>Transaction ID : SB17.11612</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 5.11
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	<b>Transaction ID : SB17.11941</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 26.58
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	<b>Transaction ID : SB17.11948</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 5.96 <b>Transaction ID : SB17.11958</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 6.38 <b>Transaction ID : SB17.12267</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 165.76 <b>Transaction ID : SB17.12430</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	178.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 31.89 <b>Transaction ID : SB17.12444</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 85 Natoma Street		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : SB17.12499</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 7614.58 <b>Transaction ID : SB17.10492</b>
City WASHINGTON	State DC Zip Code 20004	
Purpose of Disbursement POSTAGE	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7675.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 5220.00 <b>Transaction ID : SB17.12276</b>
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement POSTAGE FOR MAILERS Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 1100 PENNSYLVANIA AVE		Amount of Each Disbursement this Period 4068.31 <b>Transaction ID : SB17.12278</b>
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement POSTAGE FOR MAILERS Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ROBINSON HANKS YOUNG &amp; ROBERTS PA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 133 S HARBOR DRIVE		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.10474</b>
City VENICE State FL Zip Code 34285	Purpose of Disbursement ACCOUNTING SERVICES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11788.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ROBINSON HANKS YOUNG &amp; ROBERTS PA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 133 S HARBOR DRIVE		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.10486</b>
City VENICE State FL Zip Code 34285	Purpose of Disbursement ACCOUNTING SERVICES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ROBINSON HANKS YOUNG &amp; ROBERTS PA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 133 S HARBOR DRIVE		Amount of Each Disbursement this Period 19.99 <b>Transaction ID : SB17.10490</b>
City VENICE State FL Zip Code 34285	Purpose of Disbursement REIMBURSE FOR FEDEX CHARGES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ROBINSON HANKS YOUNG &amp; ROBERTS PA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 133 S HARBOR DRIVE		Amount of Each Disbursement this Period 53.35 <b>Transaction ID : SB17.10494</b>
City VENICE State FL Zip Code 34285	Purpose of Disbursement REIMBURSE FOR FEDEX CHARGES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2573.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Fed Ex</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 9802-16 Baymeadows Blvd		Amount of Each Disbursement this Period 53.35
City Jacksonville State FL Zip Code 32256	Purpose of Disbursement SHIPPING COSTS 001 Category/Type	
Candidate Name		Transaction ID : SB17.10494.0 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ROBINSON HANKS YOUNG &amp; ROBERTS PA</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 133 S HARBOR DRIVE		Amount of Each Disbursement this Period 2500.00
City VENICE State FL Zip Code 34285	Purpose of Disbursement ACCOUNTING SERVICES 001 Category/Type	
Candidate Name		Transaction ID : SB17.12277
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. THE GULA GRAHAM GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 499 S CAPITOL ST SW STE 420		Amount of Each Disbursement this Period 2720.51
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement FUNDRAISING CONSULTING FEES 003 Category/Type	
Candidate Name		Transaction ID : SB17.10473
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5220.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 83		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE GULA GRAHAM GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014		
Mailing Address 499 S CAPITOL ST SW STE 420			Amount of Each Disbursement this Period 7057.02		
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.10487		
Purpose of Disbursement FUNDRAISING CONSULTING FEES		Category/Type 003			
Candidate Name					
Office Sought:	House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7057.02
<b>TOTAL</b> This Period (last page this line number only).....	51923.04

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 83	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**RON DESANTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DAVID JOLLY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 05 / 2014</b>
Mailing Address P. O. BOX 1158		Amount of Each Disbursement this Period <b>1000.00</b>
City <b>INDIAN ROCKS BEACH</b>	State <b>FL</b>	
Purpose of Disbursement <b>POLITICAL DONATION</b>	Zip Code <b>33785</b>	<b>Transaction ID : SB18.10488</b>
Candidate Name	Category/ Type <b>011</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>FL</b> District: <b>13</b>		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1000.00</b>