

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Democratic Executive Committee of Florida

ADDRESS (number and street) 214 South Bronough Street
 Check if different than previously reported. (ACC)
Tallahassee FL 32302

2. **FEC IDENTIFICATION NUMBER** C00005561
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2006 through 02 28 2006

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 Rudy Parker

Signature of Treasurer Electronically Filed by Rudy Parker Date 03 20 2006

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
Democratic Executive Committee of Florida

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		118135.33
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	107045.70									
(c) Total Receipts (from Line 19)	92696.91	135961.80								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	199742.61	254097.13								
7. Total Disbursements (from Line 31)	139135.43	193489.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	60607.18	60607.18								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	160581.02									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Democratic Executive Committee of Florida

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	35988.70	35988.70
(i) Itemized (use Schedule A)	9730.56	10010.56
(ii) Unitemized	45719.26	45999.26
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1818.70	1818.70
(b) Political Party Committees	200.00	1700.00
(c) Other Political Committees (such as PACs)	47737.96	49517.96
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	124.40	284.40
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	191.53	421.99
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	44643.02	85737.45
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	44643.02	85737.45
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92696.91	135961.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48053.89	50224.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	38022.89	49155.38
(ii) Non-Federal Share.....	96721.54	138608.40
(b) Other Federal Operating Expenditures.....	10.00	845.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	134754.43	188608.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	4381.00	4881.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	4381.00	4881.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	139135.43	193489.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	42413.89	54881.55

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	47737.96	49517.96
34. Total Contribution Refunds (from Line 28(d))	4381.00	4881.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43356.96	44636.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38032.89	50000.55
37. Offsets to Operating Expenditures (from Line 15, page 3)	124.40	284.40
38. Net Operating Expenditures (subtract Line 37 from Line 36)	37908.49	49716.15

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. Sheet Metal Workers' International Association PAL		Date of Receipt MM / DD / YYYY 02 / 01 / 2006
Mailing Address 1750 New York Avenue, NW		Transaction ID: 11ai-000063583
City Washington State DC Zip Code 20006	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00
Name of Employer Sheet Metal Workers' International Ass Occupation PAC	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

Full Name (Last, First, Middle Initial) B. Messer, Caparello & Self		Date of Receipt MM / DD / YYYY 02 / 21 / 2006
Mailing Address 215 S Monroe Street, Suite 701		Transaction ID: 11ai-000063794
City Tallahassee State FL Zip Code 32302-1876	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Messer, Caparello & Self Occupation Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) C. Kevin X. Crowley		Date of Receipt MM / DD / YYYY 02 / 17 / 2006
Mailing Address 3184 Hawks Landing Drive		Transaction ID: 11ai-000063807
City Tallahassee State FL Zip Code 32309	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer PENNINGTON MOORE Occupation attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Rosemarie Totaro Mailing Address 2227 Donato Drive City State Zip Code Bellaire Beach FL 34635 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6 Transaction ID: 11 ai-000063817 Amount of Each Receipt this Period 400.00
Name of Employer Occupation Unemployed Homemaker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00		

B. Full Name (Last, First, Middle Initial) Bruce A. Minnick, PA Mailing Address Attorneys At Law PO Box 15588 City State Zip Code Tallahassee FL 32317-5588 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 11 ai-000063797 Amount of Each Receipt this Period 250.00
Name of Employer Occupation The Minnick Law Firm Attorney at law Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Pat A. Frank Mailing Address 3106 W. Prospect Raod City State Zip Code Tampa FL 33629 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 Transaction ID: 11 ai-000063876 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Hillsborough County Clerk of the Court Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Jason Busto

Mailing Address 1702 Street Louis

City Tampa State FL Zip Code 33607

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

Name of Employer Busto Plumberry Occupation Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063879

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Michael J. Trentalange

Mailing Address 2506 Mystic Point Way

City Tampa State FL Zip Code 33611

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

Name of Employer Trentalange & Kelley Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063883

Amount of Each Receipt this Period
 2000.00

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

Mailing Address Smith Clark Delesie Bierley Muelle
PO Box 2939

City Tampa State FL Zip Code 33601

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

Name of Employer Smith Clark Delesie Bierley Mueller & Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063881

Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Helen Gordon Davis

Mailing Address 45 Adalia Avenue

City Tampa State FL Zip Code 33606-3301

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 11 ai-000063826

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
T. Janee Murphy

Mailing Address 16907 Candeleda De Avila

City Tampa State FL Zip Code 33613

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

Name of Employer Hillsborough DEC Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 11 ai-000063835

Amount of Each Receipt this Period
275.00

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

Mailing Address Beckwith Electric Co. Inc.
6190 118th Avenue

City Largo State FL Zip Code 33773-3724

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

Name of Employer Beckwith Electric Co. Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 11 ai-000063748

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	1675.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 65
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. Celeste C. Bush		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 412 Farmers Market Road		Transaction ID: 11 ai-000063865	
City State Zip Code Fort Pierce FL 34982	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed/ St. Lucie DEC	Occupation Chair		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Linda C. Cox		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address 2573 Noble Drive		Transaction ID: 11 ai-000063790	
City State Zip Code Tallahassee FL 32308-6488	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lewis Longman & Walker	Occupation Attorney & Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Bryan M. Desloge		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address Leadership Tallahassee 1213 Miccosukee Road		Transaction ID: 11 ai-000063791	
City State Zip Code Tallahassee FL 32308-5007	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Desloge Home Oxygen & Medical Equipmen	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. Adam Diasti		Date of Receipt MM / DD / YYYY 02 / 20 / 2006
Mailing Address 822 S Bayside Drive		Transaction ID: 11 ai-000063769
City Tampa	State FL	Zip Code 33606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Coast Dental Svc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Adam Diasti		Date of Receipt MM / DD / YYYY 02 / 28 / 2006
Mailing Address 822 S Bayside Drive		Transaction ID: 11 ai-000063882
City Tampa	State FL	Zip Code 33606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Coast Dental Svc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Sarah T. Jordan-Holmes		Date of Receipt MM / DD / YYYY 02 / 28 / 2006
Mailing Address 3825 Henderson Blvd, Suite 402		Transaction ID: 11 ai-000063875
City Tampa	State FL	Zip Code 33629-5012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Prevent Blindness Florida	Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Richard M. Lobo

Mailing Address P.O. Box 4033
1300 N Boulevard

City Tampa State FL Zip Code 33607-5645

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

Name of Employer WEDU Occupation President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2006

Transaction ID: 11 ai-000063806

Amount of Each Receipt this Period
2000.00

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

Mailing Address 1682 Oceanview Drive

City Saint Petersburg State FL Zip Code 33715-2500

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

Name of Employer Rummel Group Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 11 ai-000063827

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Michele Marie Rehwinkel

Mailing Address 3018 Brandemere Drive

City Tallahassee State FL Zip Code 32312-2438

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

Name of Employer Tallahassee Community College Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 11 ai-000063799

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. Samuel Rogers, Jr.		Date of Receipt MM / DD / YYYY 02 / 21 / 2006
Mailing Address 1741 Marston Place		Transaction ID: 11 ai-000063800
City Tallahassee	State FL	Zip Code 32308-0923
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Rogers, Atkins, Gunter	Occupation Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Clara Jane Smith		Date of Receipt MM / DD / YYYY 02 / 21 / 2006
Mailing Address 416 Plantation Road		Transaction ID: 11 ai-000063802
City Tallahassee	State FL	Zip Code 32303-4206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Landscape/Vineyard Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dale M. Swope		Date of Receipt MM / DD / YYYY 02 / 23 / 2006
Mailing Address 777 S Harbour Island Blvd, Suite 8		Transaction ID: 11 ai-000063932
City Tampa	State FL	Zip Code 33602-5746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Swope Law Group	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. Carolyn A. Wadlinger		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address 1901 East Lake Woodlands Parkway		Transaction ID: 11 ai-000063787	
City State Zip Code Oldsmar FL 34677	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Eskay Music & Health Care Consulting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Victoria Lynn Weber		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address PO Box 6526		Transaction ID: 11 ai-000063798	
City State Zip Code Tallahassee FL 32314	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Steel Hector & Davis LLP	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Pasco DEC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 6	
Mailing Address 5623 Us Highway 19		Transaction ID: 11 ai-000063604	
City State Zip Code New Port Richey FL 34652-3700	Amount of Each Receipt this Period 237.39		
FEC ID number of contributing federal political committee. C			
Name of Employer Pasco DEC	Occupation Party Committee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.39		

SUBTOTAL of Receipts This Page (optional) ▶	787.39
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Indian River DEC

Mailing Address PO Box 651241

City State Zip Code
Vero Beach FL 32965-1241

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

Name of Employer Occupation
Indian River DEC Party Executive Committee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.25

Date of Receipt
MM / DD / YYYY
02 / 23 / 2006

Transaction ID: 11 ai-000063928

Amount of Each Receipt this Period
226.25

B. Full Name (Last, First, Middle Initial)
Evelyn Elliott Presley

Mailing Address 3393 Dumaine Court

City State Zip Code
Clearwater FL 33761

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2006

Transaction ID: 11 ai-000063867

Amount of Each Receipt this Period
800.00

C. Full Name (Last, First, Middle Initial)
John T. Herndon

Mailing Address 3701 Bobbin Brook West

City State Zip Code
Tallahassee FL 32312

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

Name of Employer Occupation
Southern Strategy Strategic Message

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 11 ai-000063795

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1276.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Velva W. Clark

Mailing Address 1715 North Westshore Blvd

City Tampa State FL Zip Code 33607

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

Name of Employer Unemployed Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063886

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Albert A. Fox, Jr.

Mailing Address 3425 W. Kirby Street

City Tampa State FL Zip Code 33606

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

Name of Employer Alliance For Responsible Cuba Policy Fo Occupation Account Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063878

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Sandra W. Freedman

Mailing Address 3435 Bayshore Blvd, Apt. 700

City Tampa State FL Zip Code 33629-8827

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063885

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Daniel Fuchs

Mailing Address 621 Forest Lair

City State Zip Code
Tallahassee FL 32312-1740

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 11 ai-000063792

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Linda Loomis Shelley

Mailing Address 101 N Monroe Street

City State Zip Code
Tallahassee FL 32301-1549

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

Name of Employer Occupation
Fowler, White, Boggs, Banker, PA Assistant Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 11 ai-000063801

Amount of Each Receipt this Period
250.00

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

Mailing Address 1773 Long Bow Lane

City State Zip Code
Clearwater FL 33764

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

Name of Employer Occupation
Self Employed Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2006

Transaction ID: 11 ai-000063751

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
L. Callaghan

Mailing Address 254 2nd Avenue, North

City State Zip Code
Safety Harbor FL 34695

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11 ai-000063908

Amount of Each Receipt this Period
100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11 ai-000063788

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Robert Charles Brooks

Mailing Address P.O. Box 128

City State Zip Code
Saint Marks FL 32355

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

Name of Employer Merrill Lynch Occupation Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11 ai-000063789

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Tina Jones

Mailing Address 1745 North Boulevard

City Tampa State FL Zip Code 33612

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

Name of Employer Self Employed Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 11 ai-000063818

Amount of Each Receipt this Period
300.00

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

Mailing Address 1300 Misty Pines Circle

City Naples State FL Zip Code 34105

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

Name of Employer Self Employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.06

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 11 ai-000063831

Amount of Each Receipt this Period
200.06

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

Mailing Address 6030 River Trace Street

City Tampa State FL Zip Code 33617

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2006

Transaction ID: 11 ai-000063872

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1500.06
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. Lorna T. Gregory		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 3009 West Villa Rosa Park		Transaction ID: 11 ai-000063877
City State Zip Code Tampa FL 33611	Amount of Each Receipt this Period 900.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unemployed	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Harry M. Cohen		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 2611 Bayshore Blvd. #1203		Transaction ID: 11 ai-000063880
City State Zip Code Tampa FL 33629	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. John Paul Austin		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 255 Evernia Street #805		Transaction ID: 11 ai-000063884
City State Zip Code West Palm Beach FL 33401	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Financial Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3900.00
TOTAL This Period (last page this line number only) ▶	35988.70

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 65
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Pinellas County Democratic Executive Committee

Mailing Address 2250 1st Avenue N

City State Zip Code
St. Petersburg FL 33713

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1513.56

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 0 6

Transaction ID: 11b-000063929

Amount of Each Receipt this Period
1513.56

Disgorgement of Federal Funds

B. Full Name (Last, First, Middle Initial)
Charlotte County Democratic Executive Committee

Mailing Address 163 Harbor Blvd

City State Zip Code
Fort Charlotte FL 33952

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.14

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 0 6

Transaction ID: 11b-000063927

Amount of Each Receipt this Period
305.14

SUBTOTAL of Receipts This Page (optional)	▶	1818.70
TOTAL This Period (last page this line number only)	▶	1818.70

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 65
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Christine Jennings For Congress 2006

Mailing Address PO Box 49135

City	State	Zip Code
Sarasota	FL	34230

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	0	6

Transaction ID: 11c-000063931

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	200.00
TOTAL This Period (last page this line number only)	▶	200.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 65
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. U.S. Postal Service - Tallahassee		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 2800 S. Adams Street		Transaction ID: 15-20-00305-00677
City State Zip Code Tallahassee FL 32301-9998	Amount of Each Receipt this Period 111.34	
FEC ID number of contributing federal political committee. C	Postage Refund	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 111.34	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 6
Mailing Address PO Box 94515		Transaction ID: 15-20-00273-00534
City State Zip Code Palatine IL 60094-4515	Amount of Each Receipt this Period 13.06	
FEC ID number of contributing federal political committee. C	Shipping Refund	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 13.06	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	124.40
TOTAL This Period (last page this line number only) ▶	124.40

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 65
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Capital City Bank

Mailing Address 2111 N. Monroe Street

City	State	Zip Code
Tallahassee	FL	32303

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
421.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	6

Transaction ID: 17-20-00330-00598

Amount of Each Receipt this Period
191.53

Interest

SUBTOTAL of Receipts This Page (optional)	▶	191.53
TOTAL This Period (last page this line number only)	▶	191.53

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 65

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

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)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

A. State of Florida

Mailing Address Room 316 R.A. Gray Building
500 South Bronough Street

City Tallahassee State FL Zip Code 32399

Purpose of Disbursement
Voter File

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 21b-20-00362-00648

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 / 65

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

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial) A. T. Janee Murphy		Transaction ID: 28a-20-00322-00590 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 16907 Candeleda De Avila		Amount of Each Disbursement this Period 275.00
City Tampa State FL Zip Code 33613	Purpose of Disbursement Contribution Refund	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Blannie Whelan		Transaction ID: 28a-20-00351-00634 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 275 Bayshore Boulevard #1108		Amount of Each Disbursement this Period 100.00
City Tampa State FL Zip Code 33606	Purpose of Disbursement Refund	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Richard Lobo		Transaction ID: 28a-20-00352-00635 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 3139 Bayshore Road		Amount of Each Disbursement this Period 2000.00
City Sarasota State FL Zip Code 34234	Purpose of Disbursement Refund	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2375.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 65

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

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Kathy Richter

Mailing Address 2008 Tanglewood Way, NE

City State Zip Code
St. Petersburg FL 33702

Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 28a-20-00353-00636
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADT	Nature of Debt (Purpose): Security
Mailing Address P. O. BOX 9001076	
City State ZIP Code Louisville KY 40290-1076	

Outstanding Balance Beginning This Period <input type="text" value="60.19"/>	Transaction ID: 10-000064	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="60.19"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADT	Nature of Debt (Purpose): Security
Mailing Address P. O. BOX 9001076	
City State ZIP Code Louisville KY 40290-1076	

Outstanding Balance Beginning This Period <input type="text" value="60.19"/>	Transaction ID: 10-000106	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="60.19"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADT	Nature of Debt (Purpose): Security Services
Mailing Address P. O. BOX 9001076	
City State ZIP Code Louisville KY 40290-1076	

Outstanding Balance Beginning This Period <input type="text" value="60.19"/>	Transaction ID: 10-000112	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="60.19"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="180.57"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADT	Nature of Debt (Purpose): Security
Mailing Address P. O. BOX 9001076	
City State ZIP Code Louisville KY 40290-1076	

Outstanding Balance Beginning This Period 60.19	Transaction ID: 10-000150	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 60.19

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ADT	Nature of Debt (Purpose): Security
Mailing Address P. O. BOX 9001076	
City State ZIP Code Louisville KY 40290-1076	

Outstanding Balance Beginning This Period 60.19	Transaction ID: 10-000165	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 60.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Allied Protection Services, Inc.	Nature of Debt (Purpose): Security Services
Mailing Address PO Box 7259	
City State ZIP Code Ft. Myers FL 33911	

Outstanding Balance Beginning This Period 706.20	Transaction ID: 10-000133	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 706.20

1) SUBTOTALS This Period This Page (optional).....	826.58
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express	Nature of Debt (Purpose): Contribution Refund
Mailing Address P.O. Box 360002	
City State ZIP Code Fort Lauderdale FL 33336-0002	

Outstanding Balance Beginning This Period 12092.59	Transaction ID: 10-000134	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12092.59

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Business Equipment Solutions	Nature of Debt (Purpose): Copier
Mailing Address 3120 N. Davis Hwy - PO Box 9435	
City State ZIP Code Pensacola FL 32513	

Outstanding Balance Beginning This Period 408.44	Transaction ID: 10-000130	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 408.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carr, Riggs, & Ingram	Nature of Debt (Purpose): Audit
Mailing Address 1713 Mahan Drive	
City State ZIP Code Tallahassee FL 32308	

Outstanding Balance Beginning This Period 5000.00	Transaction ID: 10-000005	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional).....	17501.03
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carr, Riggs, & Ingram	Nature of Debt (Purpose): Audit
Mailing Address 1713 Mahan Drive	
City State ZIP Code Tallahassee FL 32308	

Outstanding Balance Beginning This Period 18438.97	Transaction ID: 10-000032	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18438.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carr, Riggs, & Ingram	Nature of Debt (Purpose): Audit
Mailing Address 1713 Mahan Drive	
City State ZIP Code Tallahassee FL 32308	

Outstanding Balance Beginning This Period 5276.84	Transaction ID: 10-000050	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5276.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Center for Independent Living	Nature of Debt (Purpose): Interpreting Services
Mailing Address 720 N. Denning Drive	
City State ZIP Code Winter Park FL 32789	

Outstanding Balance Beginning This Period 1080.00	Transaction ID: 10-000181	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1080.00

1) SUBTOTALS This Period This Page (optional).....	24795.81
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor City of Tallahassee	Nature of Debt (Purpose): Utilities
Mailing Address 600 North Monroe Street	
City State ZIP Code Tallahassee FL 32301-1262	

Outstanding Balance Beginning This Period <input type="text" value="1443.56"/>	Transaction ID: 10-000186	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1443.56"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast	Nature of Debt (Purpose): Cable
Mailing Address PO Box 530098	
City State ZIP Code Atlanta GA 30353-0098	

Outstanding Balance Beginning This Period <input type="text" value="100.85"/>	Transaction ID: 10-000175	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="100.85"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ElectroNet	Nature of Debt (Purpose): Website Hosting
Mailing Address 3411 Capital Medical Boulevard	
City State ZIP Code Tallahassee FL 32308	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: 10-000153	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1544.41"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ElectroNet			Nature of Debt (Purpose): Internet
Mailing Address 3411 Capital Medical Boulevard			
City State Tallahassee FL	ZIP Code 32308		

Outstanding Balance Beginning This Period <input type="text" value="155.00"/>		Transaction ID: 10-000183	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="155.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Florida Business Information, Inc.			Nature of Debt (Purpose): Newscipping Service
Mailing Address PO Box 193			
City State Bell FL	ZIP Code 32619		

Outstanding Balance Beginning This Period <input type="text" value="945.00"/>		Transaction ID: 10-000083	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="945.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lora M Haggard			Nature of Debt (Purpose): Consulting Fees
Mailing Address 29 Briarwood Drive			
City State Ringgold GA	ZIP Code 30736		

Outstanding Balance Beginning This Period <input type="text" value="5000.00"/>		Transaction ID: 10-000184	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="6100.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lora M Haggard	Nature of Debt (Purpose): Travel Reimbursement
Mailing Address 29 Briarwood Drive	
City State ZIP Code Ringgold GA 30736	

Outstanding Balance Beginning This Period <input type="text" value="3083.45"/>	Transaction ID: 10-000185	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3083.45"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hasler Mailing Systems and Solutions	Nature of Debt (Purpose): Equipment Rental
Mailing Address 19 Forest Parkway	
City State ZIP Code Shelton CT 06484-0903	

Outstanding Balance Beginning This Period <input type="text" value="189.74"/>	Transaction ID: 10-000192	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="189.74"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lanier Worldwide, Inc.	Nature of Debt (Purpose): Copier Lease
Mailing Address P. O. BOX 105533	
City State ZIP Code Atlanta GA 30348-5533	

Outstanding Balance Beginning This Period <input type="text" value="1623.75"/>	Transaction ID: 10-000176	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1623.75"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4896.94"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period 457.00	Transaction ID: 10-000015	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 457.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period 457.00	Transaction ID: 10-000039	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 457.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period 457.00	Transaction ID: 10-000040	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 457.00

1) SUBTOTALS This Period This Page (optional).....	1371.00
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period <input type="text" value="397.00"/>	Transaction ID: 10-000072	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="397.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period <input type="text" value="397.00"/>	Transaction ID: 10-000073	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="397.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period <input type="text" value="397.00"/>	Transaction ID: 10-000074	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="397.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1191.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period 457.00	Transaction ID: 10-000075	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 457.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research
Mailing Address PO Box 7247-7090	
City State ZIP Code Philadelphia PA 19170-7090	

Outstanding Balance Beginning This Period 457.00	Transaction ID: 10-000076	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 457.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LobbyTools, Inc.	Nature of Debt (Purpose): Subscription
Mailing Address 522 East Park Avenue	
City State ZIP Code Tallahassee FL 32301	

Outstanding Balance Beginning This Period 2600.00	Transaction ID: 10-000057	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

1) SUBTOTALS This Period This Page (optional).....	3514.00
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LobbyTools, Inc.	Nature of Debt (Purpose): Interest
Mailing Address 522 East Park Avenue	
City State ZIP Code Tallahassee FL 32301	

Outstanding Balance Beginning This Period 117.00	Transaction ID: 10-000086	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 117.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LobbyTools, Inc.	Nature of Debt (Purpose): Interest
Mailing Address 522 East Park Avenue	
City State ZIP Code Tallahassee FL 32301	

Outstanding Balance Beginning This Period 66.00	Transaction ID: 10-000117	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 66.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moreson Conferencing, Inc.	Nature of Debt (Purpose): Telephone
Mailing Address 39131 Treasury Center	
City State ZIP Code Chicago IL 60694-9100	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 10-000187	
Amount Incurred This Period 659.49	Payment This Period 0.00	Outstanding Balance at Close of This Period 659.49

1) SUBTOTALS This Period This Page (optional).....	842.49
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moreson Conferencing, Inc.			Nature of Debt (Purpose): Telephone
Mailing Address 39131 Treasury Center			
City State Chicago IL	ZIP Code 60694-9100		

Outstanding Balance Beginning This Period <input type="text" value="107.16"/>		Transaction ID: 10-000193	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="107.16"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rudy Parker			Nature of Debt (Purpose): Travel Reimbursement
Mailing Address 440 Rudolph Parker Lane			
City State Perry FL	ZIP Code 32347		

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 10-000188	
Amount Incurred This Period <input type="text" value="1153.78"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1153.78"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patton Technologies, LLC			Nature of Debt (Purpose): Software Maintenance
Mailing Address 2333 Alexandria Drive			
City State Lexington KY	ZIP Code 40504		

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 10-000194	
Amount Incurred This Period <input type="text" value="2000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3260.94"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Production Resource Group	Nature of Debt (Purpose):
Mailing Address 1902 Cypress Lake Drive	
City State ZIP Code Orlando FL 32837	

Outstanding Balance Beginning This Period 47100.00	Transaction ID: 10-000166	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 47100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Office Supply	Nature of Debt (Purpose): Office Supplies
Mailing Address P.O. Box 15038	
City State ZIP Code Tallahassee FL 32317-5038	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 10-000157	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Office Supply	Nature of Debt (Purpose): Office Supplies
Mailing Address P.O. Box 15038	
City State ZIP Code Tallahassee FL 32317-5038	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 10-000189	
Amount Incurred This Period 696.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 696.51

1) SUBTOTALS This Period This Page (optional).....	▶	47796.51
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Plus, Inc.	Nature of Debt (Purpose): Copier
Mailing Address PO Box 4197	
City State ZIP Code Tallahassee FL 32315	

Outstanding Balance Beginning This Period 988.98	Transaction ID: 10-000129	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 988.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint	Nature of Debt (Purpose): Phone
Mailing Address P. O. Box 96031	
City State ZIP Code Charlotte NC 28296-0031	

Outstanding Balance Beginning This Period 14.08	Transaction ID: 10-000097	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint	Nature of Debt (Purpose): Phone
Mailing Address P. O. Box 96031	
City State ZIP Code Charlotte NC 28296-0031	

Outstanding Balance Beginning This Period 328.31	Transaction ID: 10-000123	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 328.31

1) SUBTOTALS This Period This Page (optional).....	1331.37
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint	Nature of Debt (Purpose): Telephone
Mailing Address P. O. Box 96031	
City State ZIP Code Charlotte NC 28296-0031	

Outstanding Balance Beginning This Period <input type="text" value="622.10"/>	Transaction ID: 10-000177	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="622.10"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint	Nature of Debt (Purpose): Telephone
Mailing Address P. O. Box 96031	
City State ZIP Code Charlotte NC 28296-0031	

Outstanding Balance Beginning This Period <input type="text" value="622.10"/>	Transaction ID: 10-000190	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="622.10"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Westin Diplomat Hotel	Nature of Debt (Purpose): Catering
Mailing Address 3555 South Ocean Drive	
City State ZIP Code Hollywood FL 33019	

Outstanding Balance Beginning This Period <input type="text" value="51605.42"/>	Transaction ID: 10-000071	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="11000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="40605.42"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="41849.62"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 43 / 65
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voter Activation Network	Nature of Debt (Purpose): Voter File Hosting
Mailing Address 54 Regents Street	
City State ZIP Code Cambridge MA 02140	

Outstanding Balance Beginning This Period <input type="text" value="5250.00"/>	Transaction ID: 10-000178	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Voter Activation Network	Nature of Debt (Purpose): Voter File Maintenance
Mailing Address 54 Regents Street	
City State ZIP Code Cambridge MA 02140	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID: 10-000191	
Amount Incurred This Period <input type="text" value="3578.75"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3578.75"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3578.75"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="160581.02"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

PAGE 44 / 65

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER JJ 2005/06/01 <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">19.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">81.00</div> % Transaction ID: H2-0006
ACTIVITY OR EVENT IDENTIFIER Conference 2005/12/10 <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">9.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">91.00</div> % Transaction ID: H2-0007
ACTIVITY OR EVENT IDENTIFIER HRC Event 2006/02/25 <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">60.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">40.00</div> % Transaction ID: H2-0009

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Democratic Executive Committee of Florida

NAME OF ACCOUNT FDP NonFederal 3	DATE OF RECEIPT M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 44643.02
-------------------------------------	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		42643.02 Transaction ID: H318a-20-00311
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) HRC Event 2006/02/- 25	2000.00	Transaction ID: H318a-20-00311-00578
b)		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		2000.00
v) Direct Candidate Support (List of Activity or Event Identifier)		
a)		Transaction ID:
b)		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
TOTAL This Period (Administrative)	42643.02	
TOTAL This Period (Generic Voter Drive)	0.00	
TOTAL This Period (Exempt Activities)	0.00	
TOTAL This Period (Direct Fundraising)	2000.00	
TOTAL This Period (Direct Candidate Support)	0.00	
TOTAL This Period (Public Communications Referring Only to Party)	0.00	
TOTAL This Period (Total Amount Transferred)	44643.02	

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Jefferson Pilot Insurance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 0821			Allocated Activity or Event Year-To-Date 52946.99		
City Carol Stream	State IL	Zip Code 60132	Date MM / DD / YYYY 02 / 01 / 2006		
Purpose of Disbursement: Insurance			Transaction ID: 21a-20-00269-00528		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.74		6.53		8.27

B. Full Name (Last, First, Middle Initial) Hampton, Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 17094 Collins Ave. #510			Allocated Activity or Event Year-To-Date 53418.39		
City Miami	State FL	Zip Code 33160	Date MM / DD / YYYY 02 / 01 / 2006		
Purpose of Disbursement: See Memo Items			Transaction ID: 21a-20-00270-0003		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.99		372.41		471.40

C. Full Name (Last, First, Middle Initial) Delta Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Hartsfield-Jackson Atlanta International Airport			Allocated Activity or Event Year-To-Date 0.00		
City Atlanta	State GA	Zip Code 30320	Date MM / DD / YYYY 02 / 01 / 2006		
Purpose of Disbursement: Air Travel			Transaction ID: 21a-20-00270-00529		
Activity or Event Identifier: Administrative 2005/2006 [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.99		372.41		471.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.73		378.94		479.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) City of Tallahassee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 600 North Monroe Street			Allocated Activity or Event Year-To-Date 54678.19		
City Tallahassee	State FL	Zip Code 32301-1262	Date M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 6		
Purpose of Disbursement: Utilities			Transaction ID: 21a-20-00271-00530		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
264.56		995.24		1259.80

B. Full Name (Last, First, Middle Initial) Anagram Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 310 West Jefferson St.			Allocated Activity or Event Year-To-Date 62203.19		
City Tallahassee	State FL	Zip Code 32301	Date M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6		
Purpose of Disbursement: Rent			Transaction ID: 21a-20-00274-00535		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1580.25		5944.75		7525.00

C. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Colee Station 1404 East Las Olas Blvd			Allocated Activity or Event Year-To-Date 63203.19		
City Ft Lauderdale	State FL	Zip Code 33303	Date M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6		
Purpose of Disbursement: Postage			Transaction ID: 21a-20-00276-00537		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2054.81		7729.99		9784.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Hampton, Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 17094 Collins Ave. #510			Allocated Activity or Event Year-To-Date 63659.19		
City Miami	State FL	Zip Code 33160	Date <input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Auto Travel			Transaction ID: 21a-20-00275-00536		
Activity or Event Identifier: Administrative 2005/2006			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.76		360.24		456.00

B. Full Name (Last, First, Middle Initial) Coletta & Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 41 Union Avenue			Allocated Activity or Event Year-To-Date 68659.19		
City Memphis	State TN	Zip Code 38103	Date <input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Consulting/Fundraising			Transaction ID: 21a-20-00289-00551		
Activity or Event Identifier: Administrative 2005/2006			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

C. Full Name (Last, First, Middle Initial) Everest National Insurance Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 917807			Allocated Activity or Event Year-To-Date 68775.58		
City Orlando	State FL	Zip Code 32891-7807	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Insurance			Transaction ID: 21a-20-00278-00539		
Activity or Event Identifier: Administrative 2005/2006			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.44		91.95		116.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1170.20		4402.19		5572.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Everest National Insurance Company

Mailing Address
P.O. Box 917807

City	State	Zip Code
Orlando	FL	32891-7807

Purpose of Disbursement:
Insurance

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
68886.93

Date / /
Transaction ID: 21a-20-00279-00540

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.38		87.97		111.35

B. Full Name (Last, First, Middle Initial)
Voter Activation Network

Mailing Address
54 Regents Street

City	State	Zip Code
Cambridge	MA	02140

Purpose of Disbursement:
Voter File Maintenance

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
74136.93

Date / /
Transaction ID: 21a-20-00280-00541

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1102.50		4147.50		5250.00

C. Full Name (Last, First, Middle Initial)
Woodward, John R

Mailing Address
812 Elizabeth Drive

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:
See Memo Items

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
74156.92

Date / /
Transaction ID: 21a-20-00281-0003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.79		19.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1130.08		4251.26		5381.34

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

Mailing Address
701 First Avenue

City Sunnyvale	State CA	Zip Code 94089	Category/ Type
Purpose of Disbursement: Internet			

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: 21a-20-00281-00542

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.79		19.99

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

Mailing Address
1885 North Prairie Dunes Court

City Oviedo	State FL	Zip Code 32765	Category/ Type
Purpose of Disbursement: Consulting Fees/Administrative			

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
75040.12

Date / /
Transaction ID: 21a-20-00282-00543

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.47		697.73		883.20

C. Full Name (Last, First, Middle Initial)
Coletta & Company

Mailing Address
41 Union Avenue

City Memphis	State TN	Zip Code 38103	Category/ Type
Purpose of Disbursement: Consulting/Fundraising			

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
80040.12

Date / /
Transaction ID: 21a-20-00290-00552

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1235.47		4647.73		5883.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Capital City Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2111 N. Monroe Street			Allocated Activity or Event Year-To-Date 80095.12		
City Tallahassee	State FL	Zip Code 32303	Date <input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Bank Fees			Transaction ID: 21a-20-00291-00553		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.55		43.45		55.00

B. Full Name (Last, First, Middle Initial) Time + Plus Payroll Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3210 Lisa Court			Allocated Activity or Event Year-To-Date 97030.37		
City Tallahassee	State FL	Zip Code 32312	Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: See Memo Items			Transaction ID: 21a-20-00343-0003		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3556.40		13378.85		16935.25

C. Full Name (Last, First, Middle Initial) Baucham, Lavone			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1758			Allocated Activity or Event Year-To-Date 0.00		
City Tallahassee	State FL	Zip Code 32301	Date <input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: 21a-20-00343-00614		
Activity or Event Identifier: Administrative 2005/2006 [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.74		1082.47		1370.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3567.95		13422.30		16990.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Herron, Nora			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 503 North Ride			Allocated Activity or Event Year-To-Date _____ 0.00																						
City Tallahassee	State FL	Zip Code 32303	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	2	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative 2005/2006 [MEMO ITEM]			Transaction ID: 21a-20-00343-00615																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
296.41		1115.05		1411.46

B. Full Name (Last, First, Middle Initial) Morgan, Anne			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 741 West Keller Street			Allocated Activity or Event Year-To-Date _____ 0.00																						
City Hernando	State FL	Zip Code 34442	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	2	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative 2005/2006 [MEMO ITEM]			Transaction ID: 21a-20-00343-00616																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.10		1689.45		2138.55

C. Full Name (Last, First, Middle Initial) Navarro, Luis A.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 929 Alachua Drive			Allocated Activity or Event Year-To-Date _____ 0.00																						
City Tallahassee	State FL	Zip Code 32308	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	2	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: Administrative 2005/2006 [MEMO ITEM]			Transaction ID: 21a-20-00343-00617																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.29		4368.67		5529.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Thurman, Karen L.

Mailing Address
9067 SW 190th Avenue Road

City	State	Zip Code
Dunnellon	FL	34432

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative 2005/2006

[MEMO ITEM]

Date 02 / 15 / 2006

Transaction ID: 21a-20-00343-00618

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
665.87		2504.92		3170.79

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

Mailing Address
c/o Florida Democratic Party P.O. Box 1758

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative 2005/2006

[MEMO ITEM]

Date 02 / 15 / 2006

Transaction ID: 21a-20-00343-00619

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
509.00		1914.83		2423.83

C. Full Name (Last, First, Middle Initial)
Woodward, John R

Mailing Address
812 Elizabeth Drive

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative 2005/2006

[MEMO ITEM]

Date 02 / 15 / 2006

Transaction ID: 21a-20-00343-00620

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.99		703.46		890.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Zervigon, Mario F.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																							
Mailing Address 600 Victory Garden Drive, Apt. N11			Allocated Activity or Event Year-To-Date 98134.32																							
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y		0	2	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																	
	0	2	/	1	5	/	2	0	0	6																
Tallahassee	FL	32301	Transaction ID: 21a-20-00344-00621																							
Purpose of Disbursement: Salary			Category/ Type																							
Activity or Event Identifier: Administrative 2005/2006																										

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
231.83		872.12		1103.95

B. Full Name (Last, First, Middle Initial) Time + Plus Payroll Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																							
Mailing Address 3210 Lisa Court			Allocated Activity or Event Year-To-Date 98195.26																							
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y		0	2	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																	
	0	2	/	1	5	/	2	0	0	6																
Tallahassee	FL	32312	Transaction ID: 21a-20-00345-00622																							
Purpose of Disbursement: Payroll Service			Category/ Type																							
Activity or Event Identifier: Administrative 2005/2006																										

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.80		48.14		60.94

C. Full Name (Last, First, Middle Initial) Time + Plus Payroll Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																							
Mailing Address 3210 Lisa Court			Allocated Activity or Event Year-To-Date 106183.97																							
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td>0</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y		0	2	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																	
	0	2	/	1	5	/	2	0	0	6																
Tallahassee	FL	32312	Transaction ID: 21a-20-00302-00565																							
Purpose of Disbursement: Payroll Tax			Category/ Type																							
Activity or Event Identifier: Administrative 2005/2006																										

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1677.63		6311.08		7988.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1922.26		7231.34		9153.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Kincaid, Trevor H			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																							
Mailing Address 132-1 Dixie Drive			Allocated Activity or Event Year-To-Date 106682.39																							
City Tallahassee	State FL	Zip Code 32304	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td>0</td><td></td><td>2</td><td></td><td></td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y		0		2				2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																	
	0		2				2	0	0	6																
Purpose of Disbursement: See Memo Items			Category/ Type																							
Activity or Event Identifier: Administrative 2005/2006			Transaction ID: 21a-20-00300-0003																							

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.67		393.75		498.42

B. Full Name (Last, First, Middle Initial) Walt Disney Parks and Resorts			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																							
Mailing Address 1000 West Buena Vista Drive 220 Celebration Place			Allocated Activity or Event Year-To-Date 0.00																							
City Lake Buena Vista	State FL	Zip Code 32830	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td>0</td><td></td><td>2</td><td></td><td></td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y		0		2				2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																	
	0		2				2	0	0	6																
Purpose of Disbursement: Lodging			Category/ Type																							
Activity or Event Identifier: Administrative 2005/2006 [MEMO ITEM]			Transaction ID: 21a-20-00300-00563																							

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.67		393.75		498.42

C. Full Name (Last, First, Middle Initial) Osmond Johnson Janitorial Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																							
Mailing Address 24131 Lake Talquin Drive			Allocated Activity or Event Year-To-Date 107182.39																							
City Tallahassee	State FL	Zip Code 32310	Date <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td>0</td><td></td><td>2</td><td></td><td></td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y		0		2				2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																	
	0		2				2	0	0	6																
Purpose of Disbursement: Janitorial			Category/ Type																							
Activity or Event Identifier: Administrative 2005/2006			Transaction ID: 21a-20-00301-00564																							

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.67		788.75		998.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) University Center Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address Doak Campbell Stadium 1 Champions Way			Allocated Activity or Event Year-To-Date 107782.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-20-00303-00566			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	2	/	1	7	/	2	0	0	6																
Tallahassee	FL	32306																							
Purpose of Disbursement: Site Rental			Category/ Type																						
Activity or Event Identifier: Administrative 2005/2006																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

B. Full Name (Last, First, Middle Initial) Sylvester Management Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P. O. Box 986			Allocated Activity or Event Year-To-Date 108572.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-20-00304-00567			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	2	/	2	1	/	2	0	0	6																
Tallahassee	FL	29063																							
Purpose of Disbursement: Dues/Subscriptions/Publications			Category/ Type																						
Activity or Event Identifier: Administrative 2005/2006																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.90		624.10		790.00

C. Full Name (Last, First, Middle Initial) Epic Orlando LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 639 E. Colonial Dr Suite 201			Allocated Activity or Event Year-To-Date 113572.39																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-20-00314-00582			M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	2	/	2	2	/	2	0	0	6																
Orlando	FL	32803																							
Purpose of Disbursement: Rent			Category/ Type																						
Activity or Event Identifier: Administrative 2005/2006																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1341.90		5048.10		6390.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Coletta & Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 41 Union Avenue			Allocated Activity or Event Year-To-Date 120572.39		
City Memphis	State TN	Zip Code 38103	Date <input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Consulting/Fundraising			Transaction ID: 21a-20-00313-00581		
Activity or Event Identifier: Administrative 2005/2006			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1470.00		5530.00		7000.00

B. Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Florida			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 44144			Allocated Activity or Event Year-To-Date 122730.82		
City Jacksonville	State FL	Zip Code 32231-4144	Date <input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Insurance			Transaction ID: 21a-20-00316-00584		
Activity or Event Identifier: Administrative 2005/2006			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.27		1705.16		2158.43

C. Full Name (Last, First, Middle Initial) Authorize.Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 915 South 500 East, Suite 200			Allocated Activity or Event Year-To-Date 122919.82		
City American Fork	State UT	Zip Code 84003	Date <input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Bank Fees			Transaction ID: 21a-20-00324-00592		
Activity or Event Identifier: Administrative 2005/2006			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.69		149.31		189.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1962.96		7384.47		9347.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Sprint			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 96031			Allocated Activity or Event Year-To-Date 123499.18	
City Charlotte	State NC	Zip Code 28296-0031	Date MM / DD / YYYY 02 / 27 / 2006	
Purpose of Disbursement: Telephone			Category/Type	
Activity or Event Identifier: Administrative 2005/2006			Transaction ID: 21a-20-00317-00585	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.67		457.69		579.36

B. Full Name (Last, First, Middle Initial) ITC DeltaCom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 740597			Allocated Activity or Event Year-To-Date 123908.51	
City Atlanta	State GA	Zip Code 30374-0597	Date MM / DD / YYYY 02 / 27 / 2006	
Purpose of Disbursement: Telephone			Category/Type	
Activity or Event Identifier: Administrative 2005/2006			Transaction ID: 21a-20-00318-00586	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.96		323.37		409.33

C. Full Name (Last, First, Middle Initial) Woodward, John R			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 812 Elizabeth Drive			Allocated Activity or Event Year-To-Date 123989.51	
City Tallahassee	State FL	Zip Code 32303	Date MM / DD / YYYY 02 / 27 / 2006	
Purpose of Disbursement: See Memo Items			Category/Type	
Activity or Event Identifier: Administrative 2005/2006			Transaction ID: 21a-20-00319-0003	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.01		63.99		81.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
224.64		845.05		1069.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
WebDomains4u.com

Mailing Address
Computech Internet Services P.O. Box 11772

City	State	Zip Code
Jacksonville	FL	32239

Purpose of Disbursement:
Internet

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: 21a-20-00319-00587

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.01		63.99		81.00

B. Full Name (Last, First, Middle Initial)
Time + Plus Payroll Services

Mailing Address
3210 Lisa Court

City	State	Zip Code
Tallahassee	FL	32312

Purpose of Disbursement:
See Memo Items

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
140924.76

Date / /
Transaction ID: 21a-20-00335-0003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3556.40		13378.85		16935.25

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

Mailing Address
P.O. Box 1758

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:
Salary

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date / /
Transaction ID: 21a-20-00335-00605

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.74		1082.47		1370.21

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3556.40		13378.85		16935.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Herron, Nora

Mailing Address
503 North Ride

City	State	Zip Code	
Tallahassee	FL	32303	

Purpose of Disbursement: Salary	Category/ Type
------------------------------------	-------------------

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date 02 / 28 / 2006

Transaction ID: 21a-20-00335-00625

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
296.41		1115.05		1411.46

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

Mailing Address
741 West Keller Street

City	State	Zip Code	
Hernando	FL	34442	

Purpose of Disbursement: Salary	Category/ Type
------------------------------------	-------------------

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date 02 / 28 / 2006

Transaction ID: 21a-20-00335-00626

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
449.10		1689.45		2138.55

C. Full Name (Last, First, Middle Initial)
Navarro, Luis A.

Mailing Address
929 Alachua Drive

City	State	Zip Code	
Tallahassee	FL	32308	

Purpose of Disbursement: Salary	Category/ Type
------------------------------------	-------------------

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date 02 / 28 / 2006

Transaction ID: 21a-20-00335-00627

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.29		4368.67		5529.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Thurman, Karen L.

Mailing Address
9067 SW 190th Avenue Road

City	State	Zip Code
Dunnellon	FL	34432

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative 2005/2006

[MEMO ITEM]

Date 02 / 28 / 2006

Transaction ID: 21a-20-00335-00628

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
665.87		2504.92		3170.79

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

Mailing Address
c/o Florida Democratic Party P.O. Box 1758

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative 2005/2006

[MEMO ITEM]

Date 02 / 28 / 2006

Transaction ID: 21a-20-00335-00629

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
509.00		1914.83		2423.83

C. Full Name (Last, First, Middle Initial)
Woodward, John R

Mailing Address
812 Elizabeth Drive

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:
Salary

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative 2005/2006

[MEMO ITEM]

Date 02 / 28 / 2006

Transaction ID: 21a-20-00335-00630

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.99		703.46		890.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Time + Plus Payroll Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3210 Lisa Court			Allocated Activity or Event Year-To-Date 148888.24		
City Tallahassee	State FL	Zip Code 32312	Date <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Payroll Tax			Transaction ID: 21a-20-00336-00606		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1672.33		6291.15		7963.48

B. Full Name (Last, First, Middle Initial) Zervigon, Mario F.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 600 Victory Garden Drive, Apt. N11			Allocated Activity or Event Year-To-Date 149992.19		
City Tallahassee	State FL	Zip Code 32301	Date <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: 21a-20-00346-00623		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
231.83		872.12		1103.95

C. Full Name (Last, First, Middle Initial) Time + Plus Payroll Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3210 Lisa Court			Allocated Activity or Event Year-To-Date 150053.13		
City Tallahassee	State FL	Zip Code 32312	Date <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Payroll Service			Transaction ID: 21a-20-00347-00624		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.80		48.14		60.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1916.96		7211.41		9128.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) Carlson Wagonlit Travel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1535 Killearn Center Boulevard			Allocated Activity or Event Year-To-Date 150460.32		
City Tallahassee	State FL	Zip Code 32309	Date MM / DD / YYYY 02 / 28 / 2006		
Purpose of Disbursement: Air Travel			Transaction ID: 21a-20-00326-00594		
Activity or Event Identifier: Administrative 2005/2006					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.51		321.68		407.19

B. Full Name (Last, First, Middle Initial) Carlson Wagonlit Travel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1535 Killearn Center Boulevard			Allocated Activity or Event Year-To-Date 549.70		
City Tallahassee	State FL	Zip Code 32309	Date MM / DD / YYYY 02 / 28 / 2006		
Purpose of Disbursement: Air Travel			Transaction ID: 21a-20-00325-00593		
Activity or Event Identifier: Conference 2005/12/10					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.47		500.23		549.70

C. Full Name (Last, First, Middle Initial) Wyndham Westshore Hotel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4860 West Kennedy Boulevard			Allocated Activity or Event Year-To-Date 5000.00		
City Tampa	State FL	Zip Code 33609	Date MM / DD / YYYY 02 / 14 / 2006		
Purpose of Disbursement: Site Rental			Transaction ID: 21a-20-00286-00547		
Activity or Event Identifier: HRC Event 2006/02/25					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3000.00		2000.00		5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3134.98		2821.91		5956.89

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial) W2005 Wyn Hotels, LLP			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4860 West Kennedy Boulevard			Allocated Activity or Event Year-To-Date 17500.00		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Tampa	FL	33609-2524			
Purpose of Disbursement: Site Rental			Category/ Type		
Activity or Event Identifier: HRC Event 2006/02/25			Transaction ID: 21a-20-00315-00583		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7500.00		5000.00		12500.00

B. Full Name (Last, First, Middle Initial) W2005 Wyn Hotels, LLP			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4860 West Kennedy Boulevard			Allocated Activity or Event Year-To-Date 25673.13		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>		
Tampa	FL	33609-2524			
Purpose of Disbursement: Site Rental			Category/ Type		
Activity or Event Identifier: HRC Event 2006/02/25			Transaction ID: 21a-20-00323-00591		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4903.88		3269.25		8173.13

C. Full Name (Last, First, Middle Initial) The Westin Diplomat Hotel			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3555 South Ocean Drive			Allocated Activity or Event Year-To-Date 11080.63		
City	State	Zip Code	Date <input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Hollywood	FL	33019			
Purpose of Disbursement: Site Rental			Category/ Type		
Activity or Event Identifier: JJ 2005/06/01			Transaction ID: 21a-20-00328-00596		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2090.00		8910.00		11000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14493.88		17179.25		31673.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
38022.89		96721.54		134744.43

Image# 26920037782

Form/Schedule: **SA11ai** Disbursement of Federal Funds
Transaction ID: **11ai-000063604**
