

RECEIVED
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15 OCT 19 AM 10:58

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**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

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

12FE4M5

Todd Wilcox for US Senate

ADDRESS (number and street)

PO Box 616308

Check if different than previously reported. (ACC)

Orlando

FL

32861

2. FEC IDENTIFICATION NUMBER ▼

C C00000000

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

FL

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY
06 / 18 / 2015 through 09 / 30 / 2015

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 BRADLEY T CRATE

Signature of Treasurer BRADLEY T CRATE

Date

MM / DD / YYYY
10 / 14 / 2015

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

Office Use Only								
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FEC FORM 3
(Revised 02/2003)

20151019020027766

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Todd Wilcox for US Senate

Report Covering the Period: From:

M	M
06	

 /

D	D
18	

 /

Y	Y	Y	Y
2015			

 To:

M	M
09	

 /

D	D
30	

 /

Y	Y	Y	Y
2015			

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	258705.80	258705.80
(b) Total Contribution Refunds (from Line 20(d)) ..	300.00	300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	258405.80	258405.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	74890.64	74890.64
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	74890.64	74890.64
8. Cash on Hand at Close of Reporting Period (from Line 27)...	683515.16	
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)...	500000.00	

For further information contact:

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

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

20151019020027767

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 91

Write or Type Committee Name

Todd Wilcox for US Senate

Report Covering the Period: From:

MM / DD / YYYY
06 / 18 / 2015

To:

MM / DD / YYYY
09 / 30 / 2015

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees
(i) Itemized (use Schedule A)...

241534.75

241534.75

(ii) Unitemized

4403.10

4403.10

(iii) TOTAL of contributions
from individuals ..

245937.85

245937.85

(b) Political Party Committees...

0.00

0.00

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

0.00

0.00

(d) The Candidate

12767.95

12767.95

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

258705.80

258705.80

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate...

500000.00

500000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b))...

500000.00

500000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)...

758705.80

758705.80

20151019020027768

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	74890.64	74890.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	300.00	300.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	300.00	300.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	75190.64	75190.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	758705.80
25. SUBTOTAL (add Line 23 and Line 24)...	758705.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	75190.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	683515.16

20151019020027769

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) FAWAD AHMED			Date of Receipt MM / DD / YYYY 09 / 30 / 2015		
Mailing Address 11403 ULLSWATER LANE			Transaction ID : SA11AI.4487		
City WINDERMERE	State FL	Zip Code 34786	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C []					
Name of Employer NEPHROLOGY ASSOCIATES		Occupation MD			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00			

Full Name (Last, First, Middle Initial) MR. AHMED ALI			Date of Receipt MM / DD / YYYY 09 / 30 / 2015		
Mailing Address 1937 BREEZY HILL DRIVE			Transaction ID : SA11AI.4562		
City WINDERMERE	State FL	Zip Code 34786	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C []					
Name of Employer SELF-EMPLOYED		Occupation MD			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			

Full Name (Last, First, Middle Initial) DR. ASHLEY A ANSARA			Date of Receipt MM / DD / YYYY 09 / 30 / 2015		
Mailing Address 616 E ALTAMONTE DRIVE STE. 120			Transaction ID : SA11AI.4564		
City ALTAMONTE SPRINGS	State FL	Zip Code 32701	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C []					
Name of Employer ANSARA HOLDINGS		Occupation CEO			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			

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

20151019020027770

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. RICHARD ASTA

Mailing Address **525 MELROSE AVENUE**

City **WINTER PARK** State **FL** Zip Code **32789**

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

Name of Employer **ELRO HOLDINGS, LLC** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 24 / 2015

Transaction ID : **SA11AI.4412**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
KARAMALI A BANDEALY

Mailing Address **8719 WITTENWOOD COVE**

City **ORLANDO** State **FL** Zip Code **32836**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4523**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER BERRY

Mailing Address **157 ADLER POINT**

City **OVIEDO** State **FL** Zip Code **32765**

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

Name of Employer **PATRIOT DEFENSE GROUP, LLC** Occupation **DIRECTOR OF OPERATIONS**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4508**

Amount of Each Receipt this Period
250.00

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

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

1250.00

20151019020027771

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MS. ANGELA L BROWN

Mailing Address **2050 KING ARTHUR CIRCLE**

City MAITLAND	State FL	Zip Code 32751
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FEC ID number of contributing federal political committee. **C**

Name of Employer MERIDIAN APPRAISAL GROUP, INC.	Occupation COMMERCIAL REAL ESTATE APPRAISER
---	---

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4483**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. JENNIFER BUSH

Mailing Address **3110 CAMP ROAD**

City OVIEDO	State FL	Zip Code 32765
-----------------------	--------------------	--------------------------

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

Name of Employer INTELLIGENT CONSERVATION SYSTEMS, IN	Occupation PRESIDENT
---	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
07 / 13 / 2015

Transaction ID : **SA11AI.4457**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MS. JENNIFER BUSH

Mailing Address **3110 CAMP ROAD**

City OVIEDO	State FL	Zip Code 32765
-----------------------	--------------------	--------------------------

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

Name of Employer INTELLIGENT CONSERVATION SYSTEMS, IN	Occupation PRESIDENT
---	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
07 / 13 / 2015

Transaction ID : **SA11AI.4458**

Amount of Each Receipt this Period
2700.00

SUBTOTAL of Receipts This Page (optional)	5650.00
TOTAL This Period (last page this line number only)	

20151019020027772

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. SHAWN BUSH		Date of Receipt MM / DD / YYYY 07 / 13 / 2015	
Mailing Address 3100 CAMP RD		Transaction ID : SA11AI.4448	
City OVIEDO	State FL	Zip Code 32765	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer I-CON SYSTEMS, INC	Occupation ENGINEER		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) MR. SHAWN BUSH		Date of Receipt MM / DD / YYYY 07 / 13 / 2015	
Mailing Address 3100 CAMP RD		Transaction ID : SA11AI.4449	
City OVIEDO	State FL	Zip Code 32765	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer I-CON SYSTEMS, INC	Occupation ENGINEER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) MS. JEANNETTE BYRD		Date of Receipt MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 1770 SPRUCE AVENUE		Transaction ID : SA11AI.4399	
City WINTER PARK	State FL	Zip Code 32789	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer BYRD & ASSOCIATES, LLC	Occupation CPA		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	7400.00
TOTAL This Period (last page this line number only).....	7400.00

20151019020027773

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. DAVE CARMANY

Mailing Address 1008 GENIUS DRIVE

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Occupation
ONLINE LABELS, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2015

Transaction ID : SA11AI.4497

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM A V CECIL JR.

Mailing Address PO BOX 5375

City State Zip Code
ASHEVILLE NC 28813

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

Name of Employer Occupation
BILTMORE CO. PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM A V CECIL JR.

Mailing Address PO BOX 5375

City State Zip Code
ASHEVILLE NC 28813

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

Name of Employer Occupation
BILTMORE CO. PRESIDENT/CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SA11AI.4389

Amount of Each Receipt this Period
2700.00

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

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

8100.00

20151019020027777A

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) AMMAR CHARANI		Date of Receipt MM / DD / YYYY 08 / 05 / 2015
Mailing Address 8280 TIBET BUTLER DRIVE		Transaction ID : SA11AI.4489
City WINDERMERE	State FL	Zip Code 34786
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer NETONE INTERNATIONAL	Occupation CHAIRMAN	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) AMMAR CHARANI		Date of Receipt MM / DD / YYYY 08 / 05 / 2015
Mailing Address 8280 TIBET BUTLER DRIVE		Transaction ID : SA11AI.4490
City WINDERMERE	State FL	Zip Code 34786
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer NETONE INTERNATIONAL	Occupation CHAIRMAN	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) SAMER CHARANI		Date of Receipt MM / DD / YYYY 09 / 04 / 2015
Mailing Address 9263 PECKY CYPRESS WAY		Transaction ID : SA11AI.4384
City ORLANDO	State FL	Zip Code 32836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer ACCUMED	Occupation MANAGER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	6400.00
TOTAL This Period (last page this line number only).....	

20151019020027775

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 OF 91		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MS. CAROL CRAIG		Date of Receipt MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 2090 EASTWOOD DR		Transaction ID : SA11AI.4407	
City MERRITT ISLAND	State FL	Zip Code 32952	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2700.00	
Name of Employer CRAIG TECHNOLOGIES	Occupation CEO	Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) MS. CAROL CRAIG		Date of Receipt MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 2090 EASTWOOD DR		Transaction ID : SA11AI.4408	
City MERRITT ISLAND	State FL	Zip Code 32952	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 5400.00	
Name of Employer CRAIG TECHNOLOGIES	Occupation CEO	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) MR. ROD CRUCE		Date of Receipt MM / DD / YYYY 09 / 30 / 2015	
Mailing Address 10145 BLUE BLOOD PLACDE		Transaction ID : SA11AI.4499	
City LITTLETON	State CO	Zip Code 80125	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 500.00	
Name of Employer OPS	Occupation OWNER	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Receipts This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	

20151019020027776

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. SCOTT CHARLES DACEY			Date of Receipt MM / DD / YYYY 09 / 18 / 2015	
Mailing Address 139 TRENT SHORES DR			Transaction ID : SA11AI.4566	
City TRENT WOODS	State NC	Zip Code 28562	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C []				
Name of Employer PACE GOVERNMENT RELATIONS LLP		Occupation PARTNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [] 250.00 []		

Full Name (Last, First, Middle Initial) MR. WILLIAM DILLARD			Date of Receipt MM / DD / YYYY 09 / 18 / 2015	
Mailing Address 3281 DEER CHASE RUN			Transaction ID : SA11AI.4349	
City LONGWOOD	State FL	Zip Code 32779	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C []				
Name of Employer EMCOR SERVICES		Occupation FOUNDER & CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [] 500.00 []		

Full Name (Last, First, Middle Initial) MR. KEVIN DOYLE			Date of Receipt MM / DD / YYYY 07 / 22 / 2015	
Mailing Address 10739 ORCHARD WALK PL W			Transaction ID : SA11AI.4558	
City JACKSONVILLE	State FL	Zip Code 32257	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C []				
Name of Employer WEXFORD STRATEGIES		Occupation GOVERNMENT AFFAIRS CONSULTANT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [] 500.00 []		

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

20151019020027777

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 91			
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. ADAM EISEMAN			Date of Receipt MM / DD / YYYY 08 / 09 / 2015		
Mailing Address 81 COLFAX ROAD			Transaction ID : SA11AI.4473		
City SKILLMAN	State NJ	Zip Code 08558	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2700.00		
Name of Employer LLOYD GROUP		Occupation CEO	Amount of Each Receipt this Period 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00	Amount of Each Receipt this Period 2700.00		

Full Name (Last, First, Middle Initial) MR. RANDOLPH FIELDS			Date of Receipt MM / DD / YYYY 09 / 16 / 2015		
Mailing Address 745 FRENCH AVENUE			Transaction ID : SA11AI.4437		
City WINTER PARK	State FL	Zip Code 32789	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00		
Name of Employer GRAYROBINSON P.A.		Occupation ATTORNEY	Amount of Each Receipt this Period 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 1000.00		

Full Name (Last, First, Middle Initial) MR. PERRY FINE			Date of Receipt MM / DD / YYYY 07 / 22 / 2015		
Mailing Address 260 DOLPHIN DRIVE			Transaction ID : SA11AI.4553		
City WOODMERE	State NY	Zip Code 11598	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00		
Name of Employer TRIANGLE SERVICES		Occupation BUSINESSMAN	Amount of Each Receipt this Period 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00		

SUBTOTAL of Receipts This Page (optional).....			3950.00		
TOTAL This Period (last page this line number only).....			3950.00		

20151019020027778

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. JOHN P GILLION

Mailing Address **420 SANDRINGHAM COURT**

City **WINTER SPRINGS** State **FL** Zip Code **32708**

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

Name of Employer **MAPLEVEST MANAGEMENT, LLC** Occupation **CPA**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA11AI.4475**

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MRS. NICOLE M GOKEY

Mailing Address **21097 COUNTY ROAD 455**

City **CLERMONT** State **FL** Zip Code **34715**

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

Name of Employer **BILTMORE FAMILY** Occupation **CPA**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA11AI.4568**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. VERNON S GOKEY

Mailing Address **21097 COUNTY ROAD 455**

City **CLERMONT** State **FL** Zip Code **34715**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 MM / DD / YYYY
09 / 30 / 2015

Transaction ID : **SA11AI.4570**

Amount of Each Receipt this Period
2700.00

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

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

6900.00

20151019020027779

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 91			
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER J GRIM

Mailing Address 1005 DRUID DRIVE

City MAITLAND	State FL	Zip Code 32751
------------------	-------------	-------------------

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

Name of Employer INNOVATIVE LOGISTICS, LLC	Occupation CFO
---	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2015

Transaction ID : SA11AJ.4451

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES GROGAN

Mailing Address 1721 TIMBER EDGE DRIVE

City DELAND	State FL	Zip Code 32724
----------------	-------------	-------------------

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

Name of Employer MBI DIRECT MAIL	Occupation CEO
-------------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2015

Transaction ID : SA11AJ.4481

Amount of Each Receipt this Period
2700.00

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

Mailing Address 9030 SOUTHERN BREEZE DRIVE

City ORLANDO	State FL	Zip Code 32836
-----------------	-------------	-------------------

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

Name of Employer PARK SQUARE HOMES	Occupation EXECUTIVE VICE PRESIDENT
---------------------------------------	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SA11AJ.4503

Amount of Each Receipt this Period
1000.00

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

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

6400.00

20151019020027780

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
SOHAIL HALANI

Mailing Address **11018 ULLSWATER LANE**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **FOOD VENTURE TAMPA, LLC** Occupation **VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt **09 / 22 / 2015**

Transaction ID : **SA11AI.4599**

Amount of Each Receipt this Period **900.00**

IN-KIND: **FACILITY RENTAL/CATERING SERVICES**

B. Full Name (Last, First, Middle Initial)
MR. BAXTER HAYES

Mailing Address **3000 1ST ST S**

City **JACKSONVILLE** State **FL** Zip Code **32250**

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

Name of Employer **ESSENTIA, INC.** Occupation **CEO & FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **08 / 27 / 2015**

Transaction ID : **SA11AI.4351**

Amount of Each Receipt this Period **2700.00**

C. Full Name (Last, First, Middle Initial)
MR. BAXTER HAYES

Mailing Address **3000 1ST ST S**

City **JACKSONVILLE** State **FL** Zip Code **32250**

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

Name of Employer **ESSENTIA, INC.** Occupation **CEO & FOUNDER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **08 / 27 / 2015**

Transaction ID : **SA11AI.4352**

Amount of Each Receipt this Period **2700.00**

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

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

6300.00

201510190200277781

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 91		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MS. TERESA HAYES

Mailing Address 3000 1ST ST S

City JACKSONVILLE State FL Zip Code 32250

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 MM / DD / YYYY
 08 / 27 / 2015

Transaction ID : SA11AI.4360

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MS. TERESA HAYES

Mailing Address 3000 1ST ST S

City JACKSONVILLE State FL Zip Code 32250

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 MM / DD / YYYY
 08 / 27 / 2015

Transaction ID : SA11AI.4361

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. GREGG HILL

Mailing Address 1350 CITY VIEW CENTER

City OVIEDO State FL Zip Code 32765

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

Name of Employer **SEA HILLS TWELVE** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 MM / DD / YYYY
 09 / 30 / 2015

Transaction ID : SA11AI.4370

Amount of Each Receipt this Period
1000.00

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

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

6400.00

20151019020027782

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. MICHAEL HINN			Date of Receipt MM / DD / YYYY 09 / 13 / 2015		
Mailing Address 130 SOUTH ORANGE AVENUE SUITE 150			Transaction ID : SA11AI.4469		
City ORLANDO	State FL	Zip Code 32801	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00		
Name of Employer KNIGHT AGENCY		Occupation BUSINESS OWNER	Amount of Each Receipt this Period 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00		

Full Name (Last, First, Middle Initial) MR. G. RICHARD HOSTETTER			Date of Receipt MM / DD / YYYY 09 / 15 / 2015		
Mailing Address 1800 PEMBROOK DRIVE SUITE 300			Transaction ID : SA11AI.4403		
City ORLANDO	State FL	Zip Code 32810	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00		
Name of Employer COMMERCENTERS, LLC		Occupation BUSINESSMAN/ATTORNEY	Amount of Each Receipt this Period 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00		

Full Name (Last, First, Middle Initial) MR. KEVIN HULBERT			Date of Receipt MM / DD / YYYY 07 / 12 / 2015		
Mailing Address 11404 NORTHWIND CT			Transaction ID : SA11AI.4381		
City RESTON	State VA	Zip Code 20194	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00		
Name of Employer XK GROUP		Occupation PRESIDENT	Amount of Each Receipt this Period 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

20151019020027783

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. KEVIN HULBERT

Mailing Address **11404 NORTHWIND CT**

City **RESTON** State **VA** Zip Code **20194**

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

Name of Employer **XK GROUP** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
09 / 04 / 2015

Transaction ID : **SA11AI.4382**

Amount of Each Receipt this Period
1700.00

B. Full Name (Last, First, Middle Initial)
MR. DANIEL R HUNT

Mailing Address **189 S ORANGE AVE., STE 870**

City **ORLANDO** State **FL** Zip Code **32801**

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

Name of Employer **CRANKSHAFT REBUILDERS INC** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
08 / 25 / 2015

Transaction ID : **SA11AI.4346**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. DANIEL R HUNT

Mailing Address **189 S ORANGE AVE., STE 870**

City **ORLANDO** State **FL** Zip Code **32801**

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

Name of Employer **CRANKSHAFT REBUILDERS INC** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
08 / 25 / 2015

Transaction ID : **SA11AI.4347**

Amount of Each Receipt this Period
2700.00

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

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

7100.00

20151019020027784

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER HURN

Mailing Address 1672 KERSLEY CIRCLE

City HEATHROW State FL Zip Code 32746

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

Name of Employer FOUNTAINHEAD COMMERCIAL CAPITAL Occupation SMALL BUSINESS FINANCIER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. MARC HURWITZ

Mailing Address 1925 NE 213 TERRACE

City MIAMI State FL Zip Code 33179

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

Name of Employer CROSSROADS INVESTIGATIONS Occupation PRIVATE INVESTIGATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
08 / 18 / 2015

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period
250.00

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

Mailing Address 1830 W FAWSETT RD

City WINTER PARK State FL Zip Code 32789

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

Name of Employer ISU JALLAD INSURANCE SERVCIES Occupation INSURANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... 750.00

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

20151019020027785

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
JENNIFER MCDUGALD, LLC

Mailing Address PO BOX 521

City: WINDERMERE State: FL Zip Code: 34786

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

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 01 / 2015

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period: 1000.00

IN-KIND: FUNDRAISING CONSULTING

B. Full Name (Last, First, Middle Initial)
MRS. SHELINA S JIWANI

Mailing Address 1724 WHITNEY ISLES DRIVE

City: WINDERMERE State: FL Zip Code: 34786

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

Name of Employer: Occupation:
NOBLE KIDZ, INC. VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 30 / 2015

Transaction ID : SA11AI.4572

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MRS. CHANTELE JOHNSON

Mailing Address 1123 MORRIS AVENUE

City: ORLANDO State: FL Zip Code: 32803

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

Name of Employer: Occupation:
HOMEMAKER HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2700.00

Date of Receipt: 09 / 30 / 2015

Transaction ID : SA11AI.4441

Amount of Each Receipt this Period: 2700.00

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

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

3950.00

20151019020027786

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MRS. CHANTELE JOHNSON

Mailing Address **1123 MORRIS AVENUE**

City **ORLANDO** State **FL** Zip Code **32803**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4442**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. CHRIS JOHNSON

Mailing Address **1660 CHASE LANDING WAY**

City **WINTER PARK** State **FL** Zip Code **32789**

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

Name of Employer **SUPERIOR FENCE** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4541**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. KENNETH W JOHNSON

Mailing Address **PO BOX 271345**

City **TAMPA** State **FL** Zip Code **33688**

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

Name of Employer **SELF-EMPLOYED** Occupation **GENERAL CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
09 / 22 / 2015

Transaction ID : **SA11AI.4525**

Amount of Each Receipt this Period
500.00

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

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

3700.00

20151019020027787

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. JOHN JORDAN

Mailing Address **PO BOX 620543**

City ORLANDO	State FL	Zip Code 32862
------------------------	--------------------	--------------------------

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

Name of Employer TOTAL LOGISTIC SERVICES, INC.	Occupation LOGISTICIAN
--	----------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4551**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. PETER R KASSABOV

Mailing Address **851 VIRGINIA DR**

City WINTER PARK	State FL	Zip Code 32789
----------------------------	--------------------	--------------------------

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

Name of Employer KASA VENTURES	Occupation MANAGING DIRECTOR
--	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
09 / 18 / 2015

Transaction ID : **SA11AI.4462**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. PETER R KASSABOV

Mailing Address **851 VIRGINIA DR**

City WINTER PARK	State FL	Zip Code 32789
----------------------------	--------------------	--------------------------

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

Name of Employer KASA VENTURES	Occupation MANAGING DIRECTOR
--	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
09 / 18 / 2015

Transaction ID : **SA11AI.4463**

Amount of Each Receipt this Period
2700.00

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

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

8100.00

20151019020027788

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. BRETT KEITH

Mailing Address **55 WATER MILL TOWD RD**

City **WATER MILL** State **NY** Zip Code **11976**

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

Name of Employer **ROCKWOOD** Occupation **FINANCE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4517**

Amount of Each Receipt this Period
2700.00

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

Mailing Address **11048 ULLSWATER LANE**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4527**

Amount of Each Receipt this Period
500.00

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

Mailing Address **9525 WESTOVER CLUB CIRCLE**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **LALANI ENTERPRISE LLC** Occupation **OWNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4471**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3450.00

20151019020027789

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN H LANG

Mailing Address **9018 SPENCE COURT**

City GOTHA	State FL	Zip Code 34734
----------------------	--------------------	--------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
--	----------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4529**

Amount of Each Receipt this Period
2300.00

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN H LANG

Mailing Address **9018 SPENCE COURT**

City GOTHA	State FL	Zip Code 34734
----------------------	--------------------	--------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
--	----------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4530**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. JASON LAZARUS

Mailing Address **911 OUTER ROAD**

City ORLANDO	State FL	Zip Code 32814
------------------------	--------------------	--------------------------

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

Name of Employer SYNERGY SETTLEMENT SERVICES	Occupation CEO
--	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4543**

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

6000.00

20151019020027790

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. HAROLD J LEVY

Mailing Address 1000 SOUTH OCEAN BLVD.
#404

City	State	Zip Code
BOCA RATON	FL	33432

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

Name of Employer	Occupation
FRIDIAN	FINANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. HAROLD J LEVY

Mailing Address 1000 SOUTH OCEAN BLVD.
#404

City	State	Zip Code
BOCA RATON	FL	33432

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

Name of Employer	Occupation
FRIDIAN	FINANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SA11AI.4426

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MS. DOROTHY LIDSKY

Mailing Address 5910 CAYMUS LOOP

City	State	Zip Code
WINDERMERE	FL	34786

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
MM / DD / YYYY
07 / 17 / 2015

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period
2700.00

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

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

8100.00

20151019020027791

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MS. DOROTHY LIDSKY

Mailing Address **5910 CAYMUS LOOP**

City WINDERMERE	State FL	Zip Code 34786
---------------------------	--------------------	--------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
07 / 17 / 2015

Transaction ID : **SA11AI.4364**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. ISSAC LIDSKY

Mailing Address **5910 CAYMUS LOOP**

City WINDERMERE	State FL	Zip Code 34786
---------------------------	--------------------	--------------------------

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

Name of Employer ODC CONSTRUCTION	Occupation CEO
---	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
07 / 17 / 2015

Transaction ID : **SA11AI.4494**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. ISSAC LIDSKY

Mailing Address **5910 CAYMUS LOOP**

City WINDERMERE	State FL	Zip Code 34786
---------------------------	--------------------	--------------------------

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

Name of Employer ODC CONSTRUCTION	Occupation CEO
---	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
07 / 17 / 2015

Transaction ID : **SA11AI.4495**

Amount of Each Receipt this Period
2700.00

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

201510190200277792

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. GEORGE LIVINGSTON		Date of Receipt MM / DD / YYYY 09 / 03 / 2015
Mailing Address 1800 PEMBROOK DRIVE SUITE 350		Transaction ID : SA11AI.4484
City	State Zip Code	
ORLANDO	FL 32810	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2451.39
Name of Employer NAI REALVEST	Occupation CHAIRMAN EMERITUS	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) MR. GEORGE LIVINGSTON		Date of Receipt MM / DD / YYYY 09 / 03 / 2015
Mailing Address 1800 PEMBROOK DRIVE SUITE 350		Transaction ID : SA11AI.4485
City	State Zip Code	
ORLANDO	FL 32810	Amount of Each Receipt this Period 2548.61
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5000.00
Name of Employer NAI REALVEST	Occupation CHAIRMAN EMERITUS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) MR. GEORGE LIVINGSTON		Date of Receipt MM / DD / YYYY 09 / 09 / 2015
Mailing Address 1800 PEMBROOK DRIVE SUITE 350		Transaction ID : SA11AI.4176
City	State Zip Code	
ORLANDO	FL 32810	Amount of Each Receipt this Period 151.39
FEC ID number of contributing federal political committee.	C	IN-KIND: FACILITY RENTAL/CATERING SERVICES
Name of Employer NAI REALVEST	Occupation CHAIRMAN EMERITUS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

20151019020027793

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 91		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. DOUG LONG			Date of Receipt MM / DD / YYYY 08 / 28 / 2015	
Mailing Address 12540 PARK AVE.			Transaction ID : SA11AI.4510	
City WINDERMERE	State FL	Zip Code 34786	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer PROSPECT MORTGAGE		Occupation PRESIDENT	Amount of Each Receipt this Period 1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 1000.00	

Full Name (Last, First, Middle Initial) MR. DOUG LONG			Date of Receipt MM / DD / YYYY 09 / 01 / 2015	
Mailing Address 12540 PARK AVE.			Transaction ID : SA11AI.4511	
City WINDERMERE	State FL	Zip Code 34786	Amount of Each Receipt this Period 1700.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1700.00	
Name of Employer PROSPECT MORTGAGE		Occupation PRESIDENT	Amount of Each Receipt this Period 1700.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00	Amount of Each Receipt this Period 2700.00	

Full Name (Last, First, Middle Initial) MS. LAURINDA LOTT			Date of Receipt MM / DD / YYYY 08 / 05 / 2015	
Mailing Address 8280 TIBET BUTLER DRIVE			Transaction ID : SA11AI.4555	
City WINDERMERE	State FL	Zip Code 34786	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2700.00	
Name of Employer VALENCIA COMMUNITY COLLEGE		Occupation ADJUNCT PROFESSOR	Amount of Each Receipt this Period 2700.00	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00	Amount of Each Receipt this Period 2700.00	

SUBTOTAL of Receipts This Page (optional).....	5400.00
TOTAL This Period (last page this line number only).....	

2015101902002779A

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MS. LAURINDA LOTT

Mailing Address **8280 TIBET BUTLER DRIVE**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **VALENCIA COMMUNITY COLLEGE** Occupation **ADJUNCT PROFESSOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
08 / 05 / 2015

Transaction ID : **SA11AI.4556**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. RICK LUND

Mailing Address **4101 SW 47TH AVE
STE 102**

City **DAVIE** State **FL** Zip Code **33314**

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

Name of Employer **SRT GROUP** Occupation **FOUNDER & CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
09 / 04 / 2015

Transaction ID : **SA11AI.4537**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN MAHONY

Mailing Address **14812 TANJA KING BLVD**

City **ORLANDO** State **FL** Zip Code **32828**

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

Name of Employer **KAVALIRO** Occupation **COO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 28 / 2015

Transaction ID : **SA11AI.4467**

Amount of Each Receipt this Period
1000.00

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

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

6400.00

20151019020027795

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 91			
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial) MR. DONALD MARGO III			Date of Receipt MM / DD / YYYY 07 / 19 / 2015	
Mailing Address 808 BLANCHARD AVE.			Transaction ID : SA11AI.4444	
City EL PASO	State TX	Zip Code 79902	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C [REDACTED]				
Name of Employer HUB INTERNATIONAL INSURANCE SE		Occupation INSURANCE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [REDACTED] 250.00		

B. Full Name (Last, First, Middle Initial) MR. ROBERT MCCALL			Date of Receipt MM / DD / YYYY 09 / 23 / 2015	
Mailing Address 3149 LAMANGA DR			Transaction ID : SA11AI.4372	
City MELBOURNE	State FL	Zip Code 32940	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C [REDACTED]				
Name of Employer SELF-EMPLOYED		Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [REDACTED] 500.00		

C. Full Name (Last, First, Middle Initial) MR. MARK MERITHEW			Date of Receipt MM / DD / YYYY 07 / 08 / 2015	
Mailing Address 4406 E. MAIN ST. STE #102-62			Transaction ID : SA11AI.4539	
City MESA	State AZ	Zip Code 85205	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C [REDACTED]				
Name of Employer SUBROSA INTERNATIONAL, LLC		Occupation CONTRACTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date [REDACTED] 500.00		

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

20151019020027796

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 32 OF 91	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. J PATRICK MICHAELS

Mailing Address **101 EAST KENNEDY BOULEVARD
SUITE 3300**

City **TAMPA** State **FL** Zip Code **33602**

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

Name of Employer **THE CEA GROUP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
08 / 05 / 2015

Transaction ID : **SA11AI.4376**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. J PATRICK MICHAELS

Mailing Address **101 EAST KENNEDY BOULEVARD
SUITE 3300**

City **TAMPA** State **FL** Zip Code **33602**

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

Name of Employer **THE CEA GROUP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5700.00**

Date of Receipt
08 / 05 / 2015

Transaction ID : **SA11AI.4377**

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
DR. MUHAMMAD A MOHIUDDIN

Mailing Address **11247 BRIDGE HOUSE ROAD**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **GASTROENTEROLOGY** Occupation **MD**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4430**

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

6200.00

20151019020027797

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. MARK MOORE

Mailing Address 13018 LAKE LIVE OAK DRIVE

City: ORLANDO State: FL Zip Code: 32828

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

Name of Employer: MARK MOORE Occupation: EXEC

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2015
Transaction ID : SA11AI.4477

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MR. DENNIS MURPHY

Mailing Address 2464 SW GLACIER PLACE SUITE 110

City: REDMOND State: OR Zip Code: 97756

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

Name of Employer: HAYDEN HOMES Occupation: CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 08 / 19 / 2015
Transaction ID : SA11AI.4439

Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM P NASSAL

Mailing Address 415 W. KALEY STREET

City: ORLANDO State: FL Zip Code: 32806

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

Name of Employer: THE NASSAL COMPANY Occupation: OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 30 / 2015
Transaction ID : SA11AI.4549

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional)..... 4000.00

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

201510190200277798

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A.

Full Name (Last, First, Middle Initial)
JODI NUNZIATA

Mailing Address **2351 FORREST RD**

City **WINTER PARK** State **FL** Zip Code **32789**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 MM / DD / YYYY
07 / 16 / 2015

Transaction ID : **SA11AI.4574**

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
MR. SAL NUNZIATA

Mailing Address **2351 FORREST ROAD**

City **WINTER PARK** State **FL** Zip Code **32789**

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

Name of Employer **FBC MORTGAGE LLC** Occupation **MORTGAGE BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **330.00**

Date of Receipt
 MM / DD / YYYY
07 / 16 / 2015

Transaction ID : **SA11AI.4416**

Amount of Each Receipt this Period
330.00

C.

Full Name (Last, First, Middle Initial)
MR. SAL NUNZIATA

Mailing Address **2351 FORREST ROAD**

City **WINTER PARK** State **FL** Zip Code **32789**

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

Name of Employer **FBC MORTGAGE LLC** Occupation **MORTGAGE BANKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 MM / DD / YYYY
07 / 16 / 2015

Transaction ID : **SA11AI.4417**

Amount of Each Receipt this Period
2170.00

SUBTOTAL of Receipts This Page (optional) **5000.00**

TOTAL This Period (last page this line number only)

20151019020027799

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. SAL NUNZIATA

Mailing Address **2351 FORREST ROAD**

City WINTER PARK	State FL	Zip Code 32789
----------------------------	--------------------	--------------------------

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

Name of Employer FBC MORTGAGE LLC	Occupation MORTGAGE BANKER
---	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3030.00

Date of Receipt
08 / 27 / 2015

Transaction ID : **SA11AI.4185**

Amount of Each Receipt this Period
530.00

IN-KIND: **FACILITY RENTAL/CATERING SERVICES**

B. Full Name (Last, First, Middle Initial)
MR. JOHN O'DONNELL

Mailing Address **227 SOUTH ORLANDO AVENUE, SUITE 1A**

City WINTER PARK	State FL	Zip Code 32789
----------------------------	--------------------	--------------------------

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

Name of Employer INSURANCE CONSULTANTS	Occupation INSURANCE AGENT
--	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
09 / 17 / 2015

Transaction ID : **SA11AI.4453**

Amount of Each Receipt this Period
800.00

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER OATES

Mailing Address **904 NORTH GREEN BAY ROAD**

City LAKE FOREST	State IL	Zip Code 60045
----------------------------	--------------------	--------------------------

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

Name of Employer RIMLIGHT, LLC	Occupation EXECUTIVE
--	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
07 / 24 / 2015

Transaction ID : **SA11AI.4513**

Amount of Each Receipt this Period
2700.00

SUBTOTAL of Receipts This Page (optional).....	4030.00
TOTAL This Period (last page this line number only).....	

201510190200277800

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. STUART OLIVER

Mailing Address **15415 SW 84TH CT**

City **MIAMI** State **FL** Zip Code **33157**

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

Name of Employer **SJ OLIVER CONSULTING** Occupation **INDEPENDENT CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
09 / 23 / 2015

Transaction ID : **SA11AI.4374**

Amount of Each Receipt this Period
250.00

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

Mailing Address **PO BOX 334**

City **MORAN** State **WY** Zip Code **83013**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4576**

Amount of Each Receipt this Period
2700.00

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

Mailing Address **PO BOX 334**

City **MORAN** State **WY** Zip Code **83013**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4577**

Amount of Each Receipt this Period
2700.00

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

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

5650.00

201510190200277801

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. DARIN OLSON			Date of Receipt MM / DD / YYYY 09 / 30 / 2015		
Mailing Address P.O. BOX 334			Transaction ID : SA11AI.4434		
City MORAN	State WV	Zip Code 83013	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C					
Name of Employer GLOBAL SECURITY CONSULTANTS, INC		Occupation SECURITY CONSULTANT			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00			

Full Name (Last, First, Middle Initial) MR. DARIN OLSON			Date of Receipt MM / DD / YYYY 09 / 30 / 2015		
Mailing Address P.O. BOX 334			Transaction ID : SA11AI.4435		
City MORAN	State WV	Zip Code 83013	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C					
Name of Employer GLOBAL SECURITY CONSULTANTS, INC		Occupation SECURITY CONSULTANT			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00			

Full Name (Last, First, Middle Initial) MR. JAVIER ORTIZ			Date of Receipt MM / DD / YYYY 08 / 13 / 2015		
Mailing Address 2870 PEACHTREE RD			Transaction ID : SA11AI.4401		
City ATLANTA	State GA	Zip Code 30305	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C					
Name of Employer CCC		Occupation CONSULTANT			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00			

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	8100.00

201510190200277802

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
NIRAV PANDYA

Mailing Address **5919 MASTERS BLVD**

City ORLANDO	State FL	Zip Code 32819
------------------------	--------------------	--------------------------

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

Name of Employer ORION TECHNOLOGIES, LLC	Occupation ENGINEER
--	-------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4501**

Amount of Each Receipt this Period
2700.00

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

Mailing Address **5919 MASTERS BLVD**

City ORLANDO	State FL	Zip Code 32819
------------------------	--------------------	--------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4579**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. ROB PANEPINTO

Mailing Address **138 DETMAR DRIVE**

City WINTER PARK	State FL	Zip Code 32789
----------------------------	--------------------	--------------------------

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

Name of Employer FLORENTINE STRATEGIES	Occupation PRESIDENT
--	--------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
09 / 01 / 2015

Transaction ID : **SA11AI.4419**

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....	6900.00
TOTAL This Period (last page this line number only).....	

201510190200277803

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. WILLIAM PARKER		Date of Receipt MM / DD / YYYY 08 / 25 / 2015
Mailing Address PO BOX 950028		Transaction ID : SA11AI.4534
City LAKE MARY	State FL	Zip Code 32795
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer SOUTHERN REALTY ENTERPRISES	Occupation REAL ESTATE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) MR. WILLIAM PARKER		Date of Receipt MM / DD / YYYY 08 / 25 / 2015
Mailing Address PO BOX 950028		Transaction ID : SA11AI.4535
City LAKE MARY	State FL	Zip Code 32795
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer SOUTHERN REALTY ENTERPRISES	Occupation REAL ESTATE	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) YATIN PATEL		Date of Receipt MM / DD / YYYY 09 / 01 / 2015
Mailing Address 1027 EDGEWATER DR.		Transaction ID : SA11AI.4515
City ORLANDO	State FL	Zip Code 32804
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer RISING CURVE MEDIA	Occupation BUSINESS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

201510190200277804

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 OF 91				
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. FRED W PAUZAR

Mailing Address **118 EAST JEFFERSON STREET**

City ORLANDO	State FL	Zip Code 32801
------------------------	--------------------	--------------------------

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

Name of Employer BLACKWOOD	Occupation CEO
--------------------------------------	--------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

MM	DD	YY
09	18	2015

Transaction ID : **SA11AI.4391**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MS. LEANN PERMAN

Mailing Address **1027 EDGEWATER DR.**

City ORLANDO	State FL	Zip Code 32804
------------------------	--------------------	--------------------------

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

Name of Employer LEANN PERMAN, LLC	Occupation WRITER & EDITOR
--	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

MM	DD	YY
09	01	2015

Transaction ID : **SA11AI.4366**

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. CHRIS PONTE

Mailing Address **13505 ICOT BLVD.
STE 214**

City CLEARWATER	State FL	Zip Code 33760
---------------------------	--------------------	--------------------------

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

Name of Employer CAFE PONTE	Occupation OWNER
---------------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
454.75

Date of Receipt

MM	DD	YY
09	02	2015

Transaction ID : **SA11AI.4182**

Amount of Each Receipt this Period
454.75
 IN-KIND: FACILITY RENTAL/CATERING SERVICES

SUBTOTAL of Receipts This Page (optional).....	5854.75
TOTAL This Period (last page this line number only).....	

201510190200277805

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. ROBERT POPADITCH		Date of Receipt MM / DD / YYYY 08 / 28 / 2015
Mailing Address 625 BENTLEY LANE		Transaction ID : SA11AI.4479
City MAITLAND	State FL	Zip Code 32751
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer MARKET LINK SERVICES LLC	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. LEMAN M PORTER		Date of Receipt MM / DD / YYYY 09 / 23 / 2015
Mailing Address 2501 ALAQUA DRIVE		Transaction ID : SA11AI.4357
City LONGWOOD	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer FRONTLINE INSURANCE	Occupation PRESIDENT	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) MR. LEMAN M PORTER		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 2501 ALAQUA DRIVE		Transaction ID : SA11AI.4356
City LONGWOOD	State FL	Zip Code 32779
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 700.00	
Name of Employer FRONTLINE INSURANCE	Occupation PRESIDENT	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	

201510190200277806

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. LEMAN M PORTER		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 2501 ALAQUA DRIVE		Transaction ID : SA11AI.4358
City LONGWOOD	State FL	
Zip Code 32779		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		
Name of Employer FRONTLINE INSURANCE	Occupation PRESIDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) MR. OMAR QUDDUS		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 4004 MAGUIRE BLVD #6105		Transaction ID : SA11AI.4492
City ORLANDO	State FL	
Zip Code 32803		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer OAKVIEW VENTURES, LLC	Occupation INVESTOR	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MRS. MELISSA QUEEN-GRIM		Date of Receipt MM / DD / YYYY 09 / 22 / 2015
Mailing Address 1005 DRUID DRIVE		Transaction ID : SA11AI.4581
City MAITLAND	State FL	
Zip Code 32751		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		
Name of Employer OPD	Occupation DISPATCHER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	

201510190200277807

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 91		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. DAVID ROGERS

Mailing Address **105 GRANITE PLACE**

City **WILLIAMSBURG** State **VA** Zip Code **22318**

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

Name of Employer **U.S. GOVERNMENT** Occupation **INSTRUCTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 17 / 2015

Transaction ID : **SA11AI.4583**

Amount of Each Receipt this Period
250.00

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

Mailing Address **1815 W VINE STREET
STE. 115**

City **KISSIMMEE** State **FL** Zip Code **34741**

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

Name of Employer **MAYWOOD VENTURES PROPERTY MANAGE** Occupation **HOSPITALITY MANAGEMENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4585**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES G SALMON

Mailing Address **8 PINE STREET**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **TRANSURANCE RISK RETENTION GROUP, II** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
09 / 23 / 2015

Transaction ID : **SA11AI.4379**

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1500.00

201510190200277808

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 44 OF 91	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. JEFFREY SANOW		Date of Receipt MM / DD / YYYY 09 / 28 / 2015
Mailing Address 1003 BILTMORE DR NW		Transaction ID : SA11AI.4587
City WINTER HAVEN	State FL	
Zip Code 33881		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer INDEPENDENT CONTRACTOR	Occupation INSTRUCTOR	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) ALEX SANTOS		Date of Receipt MM / DD / YYYY 07 / 30 / 2015
Mailing Address 519 PONCA TRAIL		Transaction ID : SA11AI.4465
City MAITLAND	State FL	
Zip Code 32751		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer KASA VENTURES	Occupation ENTREPRENEUR	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) MR. S. MICHAEL SCHEERINGA		Date of Receipt MM / DD / YYYY 09 / 23 / 2015
Mailing Address 9744 CARILLON PARK DRIVE		Transaction ID : SA11AI.4532
City WINDERMERE	State FL	
Zip Code 34786		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer SELF-EMPLOYED	Occupation ARCHITEC	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	

201510190200277809

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. BRIAN SCOTT		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1123 MORRIS AVENUE		Transaction ID : SA11AI.4505
City ORLANDO	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer PATRIOT DEFENSE GROUP	Occupation EXECUTIVE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) MR. BRIAN SCOTT		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1123 MORRIS AVENUE		Transaction ID : SA11AI.4506
City ORLANDO	State FL	Zip Code 32803
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer PATRIOT DEFENSE GROUP	Occupation EXECUTIVE	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) MR. FAROUK SHAMI		Date of Receipt MM / DD / YYYY 09 / 23 / 2015
Mailing Address 66 WINDWARD COVE		Transaction ID : SA11AI.4414
City SPRING	State TX	Zip Code 77381
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer FAROUK SYSTEMS	Occupation FOUNDER & CHAIRMAN	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

201510190200277810

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 46 OF 91	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. FAROUK SHAMI

Mailing Address **66 WINDWARD COVE**

City **SPRING** State **TX** Zip Code **77381**

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

Name of Employer **FAROUK SYSTEMS** Occupation **FOUNDER & CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
09 / 23 / 2015

Transaction ID : **SA11AJ.4415**

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
USMAN R SIDDIQUI

Mailing Address **8038 WHITFORD COURT**

City **WINDERMERE** State **FL** Zip Code **34786**

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

Name of Employer **FLORIDA CARDIOLOGY** Occupation **PHYSICIAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4421**

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR. ADAM SKOLNIK

Mailing Address **12001 VALLEY RD**

City **CLERMONT** State **FL** Zip Code **34715**

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

Name of Employer **ICII** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA11AI.4446**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3250.00

201510190200277811

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) SABINE STENER		Date of Receipt MM / DD / YYYY 07 / 10 / 2015
Mailing Address 4800 ST JOHNS DR		Transaction ID : SA11AI.4428
City DALLAS	State TX	Zip Code 75205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer GAEDEKE GROUP LLC	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MS. LAURA VANTIL		Date of Receipt MM / DD / YYYY 09 / 29 / 2015
Mailing Address 9801 LAUREL VALLEY DR		Transaction ID : SA11AI.4547
City WINDERMERE	State FL	Zip Code 34786
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer THE KESSLER COLLECTION	Occupation HOTEL OPERATIONS	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. RON VIGDOR		Date of Receipt MM / DD / YYYY 08 / 05 / 2015
Mailing Address 225 NE MIZNER BOULEVARD SUITE 675		Transaction ID : SA11AI.4343
City BOCA RATON	State FL	Zip Code 33432
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer ALEVO GROUP S.A.	Occupation EXECUTIVE VICE PRESIDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	

201510190200277812

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

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

FOR LINE NUMBER: PAGE 48 OF 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. RON VIGDOR

Mailing Address **225 NE MIZNER BOULEVARD SUITE 675**

City **BOCA RATON** State **FL** Zip Code **33432**

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

Name of Employer **ALEVO GROUP S.A.** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **08 / 05 / 2015**

Transaction ID : **SA11AI.4344**

Amount of Each Receipt this Period **2700.00**

B. Full Name (Last, First, Middle Initial)
MS. KAREN WHITE

Mailing Address **7572 141ST ST**

City **SEMINOLE** State **FL** Zip Code **33776**

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

Name of Employer **GENENTECH** Occupation **OUTSIDE SALES**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **09 / 24 / 2015**

Transaction ID : **SA11AI.4432**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial)
MR. CLIFTON WILCOX

Mailing Address **9509 LAUREL OAK DRIVE**

City **FREDERICKSBURG** State **VA** Zip Code **22407**

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

Name of Employer **BLUE IGUANA GROUP, LLC** Occupation **PRESIDENT/CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **08 / 10 / 2015**

Transaction ID : **SA11AI.4393**

Amount of Each Receipt this Period **2700.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5900.00

201510190200277813

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
MR. CLIFTON WILCOX

Mailing Address **9509 LAUREL OAK DRIVE**

City FREDERICKSBURG	State VA	Zip Code 22407
-------------------------------	--------------------	--------------------------

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

Name of Employer BLUE IGUANA GROUP, LLC	Occupation PRESIDENT/CEO
---	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
08 / 10 / 2015

Transaction ID : **SA11AI.4394**

Amount of Each Receipt this Period
2700.00

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

Mailing Address **9509 LAUREL OAK DRIVE**

City FREDERICKSBURG	State VA	Zip Code 22407
-------------------------------	--------------------	--------------------------

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

Name of Employer BLUE IGUANA GROUP, LLC	Occupation EXECUTIVE VICE PRESIDENT
---	---

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
08 / 10 / 2015

Transaction ID : **SA11AI.4396**

Amount of Each Receipt this Period
2700.00

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

Mailing Address **9509 LAUREL OAK DRIVE**

City FREDERICKSBURG	State VA	Zip Code 22407
-------------------------------	--------------------	--------------------------

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

Name of Employer BLUE IGUANA GROUP, LLC	Occupation EXECUTIVE VICE PRESIDENT
---	---

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
08 / 10 / 2015

Transaction ID : **SA11AI.4397**

Amount of Each Receipt this Period
2700.00

SUBTOTAL of Receipts This Page (optional).....	8100.00
TOTAL This Period (last page this line number only).....	

201510190200277814

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MS. CARRIE WILLIAMS		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 28 / 2015	
Mailing Address 1531 N. PIERCE ST. APT. 203		Transaction ID : SA11AI.4560	
City ARLINGTON State VA Zip Code 22209	Amount of Each Receipt this Period <input type="text"/> 250.00		
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period <input type="text"/> 250.00	
Name of Employer WOOF! DOG TRAINING CENTER	Occupation DOG TRAINER	Amount of Each Receipt this Period <input type="text"/> 250.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text"/> 250.00	Amount of Each Receipt this Period <input type="text"/> 250.00	

Full Name (Last, First, Middle Initial) MR. ROBERT WILLIAMS		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> 08 / 10 / 2015	
Mailing Address 4463 BRITON COURT		Transaction ID : SA11AI.4592	
City WOODBRIDGE State VA Zip Code 22192	Amount of Each Receipt this Period <input type="text"/> 1500.00		
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period <input type="text"/> 1500.00	
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period <input type="text"/> 1500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text"/> 1500.00	Amount of Each Receipt this Period <input type="text"/> 1500.00	

Full Name (Last, First, Middle Initial) MR. ROBERT WILLIAMS		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 27 / 2015	
Mailing Address 4463 BRITON COURT		Transaction ID : SA11AI.4589	
City WOODBRIDGE State VA Zip Code 22192	Amount of Each Receipt this Period <input type="text"/> 1200.00		
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period <input type="text"/> 2700.00	
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period <input type="text"/> 2700.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text"/> 2700.00	Amount of Each Receipt this Period <input type="text"/> 2700.00	

SUBTOTAL of Receipts This Page (optional).....	<input type="text"/> 2950.00
TOTAL This Period (last page this line number only).....	<input type="text"/>

201510190200277815

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 91	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) SUNCHA WILLIAMS			Date of Receipt MM / DD / YYYY 08 / 10 / 2015	
Mailing Address 4463 BRITON COURT			Transaction ID : SA11AI.4594	
City	State	Zip Code	Amount of Each Receipt this Period	
WOODBIDGE	VA	22192	1500.00	
FEC ID number of contributing federal political committee. C []				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	1500.00	

Full Name (Last, First, Middle Initial) SUNCHA WILLIAMS			Date of Receipt MM / DD / YYYY 09 / 27 / 2015	
Mailing Address 4463 BRITON COURT			Transaction ID : SA11AI.4591	
City	State	Zip Code	Amount of Each Receipt this Period	
WOODBIDGE	VA	22192	1200.00	
FEC ID number of contributing federal political committee. C []				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2700.00	

Full Name (Last, First, Middle Initial) MR. ROB WILSON			Date of Receipt MM / DD / YYYY 08 / 30 / 2015	
Mailing Address 4737 CENTRAL			Transaction ID : SA11AI.4405	
City	State	Zip Code	Amount of Each Receipt this Period	
WESTERN SPRINGS	IL	60558	500.00	
FEC ID number of contributing federal political committee. C []				
Name of Employer CORPORATE RICK MANAGEMENT, INC.		Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	500.00	

SUBTOTAL of Receipts This Page (optional)	3200.00
TOTAL This Period (last page this line number only)	

201510190200277816

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) MR. PAUL ZALUCKY		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 31 RAND ROAD		Transaction ID : SA11AJ.4596
City SOUTHPORT	State ME	
Zip Code 04576	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer INDEPENDENT CONTRACTOR	Occupation INSTRUCTOR	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address		Transaction ID : SA11AJ.4596
City	State	
Zip Code	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Transaction ID : SA11AJ.4596
City	State	
Zip Code	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period
Name of Employer	Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	241534.75

201510190200277817

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 91	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) TODD WILCOX		Date of Receipt MM / DD / YYYY 09 / 30 / 2015	
Mailing Address PO BOX 616308		Transaction ID : SA11D.4602	
City ORLANDO	State FL	Zip Code 32861	Amount of Each Receipt this Period 12767.95 IN-KIND: TRAVEL:AIR
FEC ID number of contributing federal political committee. C S6FL00335			
Name of Employer CANDIDATE	Occupation CANDIDATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 512767.95		

Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	12767.95
TOTAL This Period (last page this line number only).....	12767.95

201510190200277818

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

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

FOR LINE NUMBER: PAGE 54 OF 91
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. Full Name (Last, First, Middle Initial)
TODD WILCOX

Mailing Address **PO BOX 616308**

City **ORLANDO** State **FL** Zip Code **32861**

FEC ID number of contributing federal political committee. **C S6FL00335**

Name of Employer **CANDIDATE** Occupation **CANDIDATE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
100000.00

Date of Receipt
06 / 18 / 2015

Transaction ID : **SA13A.4190**

Amount of Each Receipt this Period
100000.00

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

Mailing Address **PO BOX 616308**

City **ORLANDO** State **FL** Zip Code **32861**

FEC ID number of contributing federal political committee. **C S6FL00335**

Name of Employer **CANDIDATE** Occupation **CANDIDATE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500000.00

Date of Receipt
09 / 30 / 2015

Transaction ID : **SA13A.4191**

Amount of Each Receipt this Period
400000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

500000.00

500000.00

201510190200277819

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. 101 RESTAURANT

Full Name (Last, First, Middle Initial)
Mailing Address 215 W COLLEGE AVE.
UNIT 101

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
10.00

Transaction ID : SB17.4264

[MEMO ITEM]

B. APEX

Full Name (Last, First, Middle Initial)
Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 21 / 2015

Amount of Each Disbursement this Period
88.40

Transaction ID : SB17.4114

C. APEX

Full Name (Last, First, Middle Initial)
Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 22 / 2015

Amount of Each Disbursement this Period
2.00

Transaction ID : SB17.4115

SUBTOTAL of Disbursements This Page (optional)..... 90.40

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

201510190200277820

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 24 / 2015

Amount of Each Disbursement this Period
14.00

Transaction ID : SB17.4116

B. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 27 / 2015

Amount of Each Disbursement this Period
20.00

Transaction ID : SB17.4117

C. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 28 / 2015

Amount of Each Disbursement this Period
108.00

Transaction ID : SB17.4118

SUBTOTAL of Disbursements This Page (optional)..... 142.00

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

201510190200277821

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 07 / 29 / 2015

Amount of Each Disbursement this Period
 4.00

Transaction ID : SB17.4119

B. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 08 / 04 / 2015

Amount of Each Disbursement this Period
 108.00

Transaction ID : SB17.4120

C. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
 MM / DD / YYYY
 08 / 10 / 2015

Amount of Each Disbursement this Period
 432.00

Transaction ID : SB17.4121

SUBTOTAL of Disbursements This Page (optional)..... 544.00

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

201510190200277822

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 OF 91

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. APEX		Date of Disbursement MM / DD / YYYY 08 / 11 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 108.00
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.4122
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. APEX		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 540.20
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.4123
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. APEX		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 120.00
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.4124
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	768.20
TOTAL This Period (last page this line number only).....	

201510190200277823

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 17 / 2015

Amount of Each Disbursement this Period
108.00

Transaction ID : SB17.4125

B. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 20 / 2015

Amount of Each Disbursement this Period
10.00

Transaction ID : SB17.4126

C. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 24 / 2015

Amount of Each Disbursement this Period
100.00

Transaction ID : SB17.4127

SUBTOTAL of Disbursements This Page (optional)..... 218.00

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

201510190200277824

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 26 / 2015

Amount of Each Disbursement this Period
20.00

Transaction ID : SB17.4128

B. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 01 / 2015

Amount of Each Disbursement this Period
20.00

Transaction ID : SB17.4129

C. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 02 / 2015

Amount of Each Disbursement this Period
20.00

Transaction ID : SB17.4130

SUBTOTAL of Disbursements This Page (optional)..... 60.00

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

201510190200277825

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
60.00

Transaction ID : SB17.4131

B. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
216.00

Transaction ID : SB17.4132

C. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 08 / 2015

Amount of Each Disbursement this Period
200.00

Transaction ID : SB17.4133

SUBTOTAL of Disbursements This Page (optional)..... 476.00

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

201510190200277826

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)
Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 09 / 2015

Amount of Each Disbursement this Period
218.00

Transaction ID : SB17.4134

Category/Type

B. APEX

Full Name (Last, First, Middle Initial)
Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 10 / 2015

Amount of Each Disbursement this Period
4.00

Transaction ID : SB17.4135

Category/Type

C. APEX

Full Name (Last, First, Middle Initial)
Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2015

Amount of Each Disbursement this Period
30.00

Transaction ID : SB17.4136

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 252.00

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

201510190200277827

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. APEX		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 40.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.4137
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. APEX		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 32.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.4138
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. APEX		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 20.00
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.4139
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	92.00
TOTAL This Period (last page this line number only).....	

201510190200277828

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. APEX		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 4.00 Transaction ID : SB17.4140
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. APEX		Date of Disbursement MM / DD / YYYY 09 / 24 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.4141
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. APEX		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 138 CONANT STREET SECOND FLOOR		Amount of Each Disbursement this Period 38.00 Transaction ID : SB17.4142
City BEVERLY	State MA Zip Code 01915	
Purpose of Disbursement MERCHANT FEES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	82.00
TOTAL This Period (last page this line number only).....	

201510190200277829

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 91
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2015

Amount of Each Disbursement this Period
24.00

Transaction ID : SB17.4143

Category/Type

B. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2015

Amount of Each Disbursement this Period
2.00

Transaction ID : SB17.4144

Category/Type

C. APEX

Full Name (Last, First, Middle Initial)

Mailing Address 138 CONANT STREET
SECOND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2015

Amount of Each Disbursement this Period
160.00

Transaction ID : SB17.4145

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 186.00

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

201510190200277830

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. ANDREW L. ASHER

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
07 / 21 / 2015

Mailing Address 4767 NEW BROAD STREET

City State Zip Code
ORLANDO FL 32814

Purpose of Disbursement
LEGAL CONSULTING

Amount of Each Disbursement this Period
7500.00

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Transaction ID : SB17.4107

B. BEAR LAKES COUNTRY CLUB

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
08 / 28 / 2015

Mailing Address 1901 VILLAGE BLVD.

City State Zip Code
WEST PALM BEACH FL 33409

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: MEAL

Amount of Each Disbursement this Period
10.50

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Transaction ID : SB17.4221

[MEMO ITEM]

C. BISHOP MEDIA GROUP

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
07 / 31 / 2015

Mailing Address 673 LITTLE WEKIVA ROAD

City State Zip Code
ALTAMONTE SPRINGS FL 32714

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Amount of Each Disbursement this Period
3100.00

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Transaction ID : SB17.4147

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

10600.00

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

201510190200277831

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

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

FOR LINE NUMBER:
(check only one)

PAGE 67 OF 91

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. BUFFALO WILD WINGS

Full Name (Last, First, Middle Initial)
Mailing Address 3290 TAMIAMI TRL E

City NAPLES State FL Zip Code 34112

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period
30.98

Transaction ID : SB17.4193

[MEMO ITEM]

B. CHICK-FIL-A

Full Name (Last, First, Middle Initial)
Mailing Address 8673 SUMMIT CENTRE WAY

City ORLANDO State FL Zip Code 32810

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
6.76

Transaction ID : SB17.4254

[MEMO ITEM]

C. CHRISSY'S COURTHOUSE TAVERN

Full Name (Last, First, Middle Initial)
Mailing Address 3340 TAMIAMI TRL E

City NAPLES State FL Zip Code 34112

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period
33.62

Transaction ID : SB17.4199

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

201510190200277832

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. CITY OF JACKSONVILLE

Full Name (Last, First, Middle Initial)
Mailing Address 117 W DUVAL ST.

City JACKSONVILLE State FL Zip Code 32202

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
8.00

Transaction ID : SB17.4258

[MEMO ITEM]

B. CITY OF TAMPA PARKING

Full Name (Last, First, Middle Initial)
Mailing Address 306 EAST JACKSON STREET

City TAMPA State FL Zip Code 33602

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2015

Amount of Each Disbursement this Period
3.00

Transaction ID : SB17.4240

[MEMO ITEM]

C. CORE MEDIA CONCEPTS

Full Name (Last, First, Middle Initial)
Mailing Address 4984 DOVER CIRCLE

City ORLANDO State FL Zip Code 32807

Purpose of Disbursement
WEB DEVELOPMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 10 / 2015

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.4149

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

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

1000.00

201510190200277833

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. DIAMOND LIMOUSINE

Mailing Address 636 20TH AVE.

City VERO BEACH State FL Zip Code 32962

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	28	2015

Amount of Each Disbursement this Period

144.00

Transaction ID : SB17.4201

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DOUBLETREE

Mailing Address 101 S ADAMS ST.

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	28	2015

Amount of Each Disbursement this Period

452.25

Transaction ID : SB17.4207

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. E-PASS

Mailing Address PO BOX 720218

City ORLANDO State FL Zip Code 32872

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TOLLS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
09	04	2015

Amount of Each Disbursement this Period

3.29

Transaction ID : SB17.4268

[MEMO ITEM]

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

0.00

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

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201510190200277834

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 91
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. E-PASS		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address PO BOX 720218		Amount of Each Disbursement this Period 18.54
City ORLANDO	State FL	
Zip Code 32872	Purpose of Disbursement MCDUGALD REIMBURSEMENT: TOLLS	Transaction ID : SB17.4272
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EXXON MOBIL		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 198 NW 51ST STREET		Amount of Each Disbursement this Period 7.21
City BOCA RATON	State FL	
Zip Code 33431	Purpose of Disbursement ROBINSON REIMBURSEMENT: TRAVEL: FUEL	Transaction ID : SB17.4234
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EXXON MOBIL		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 3000 W COLONIAL DRIVE		Amount of Each Disbursement this Period 61.58
City ORLANDO	State FL	
Zip Code 32808	Purpose of Disbursement WILCOX REIMBURSEMENT: TRAVEL: FUEL	Transaction ID : SB17.4215
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

201510190200277835

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

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

FOR LINE NUMBER:
(check only one)

PAGE 71 OF 91

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1601 WILLOW RD.

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
WILCOX REIMBURSEMENT: PLACED MEDIA

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	28	2015

Amount of Each Disbursement this Period

101.02

Transaction ID : SB17.4223

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FLYNN INTEL GROUP

Mailing Address PO BOX 23

City State Zip Code
ALEXANDRIA VA 22313

Purpose of Disbursement
TRAVEL: TRANSPORTATION

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	28	2015

Amount of Each Disbursement this Period

730.85

Transaction ID : SB17.4151

Full Name (Last, First, Middle Initial)

C. GO RENTALS

Mailing Address 8611 LEMMON AVE.

City State Zip Code
DALLAS FL 75209

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
08	28	2015

Amount of Each Disbursement this Period

124.30

Transaction ID : SB17.4211

[MEMO ITEM]

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

730.85

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

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201510190200277836

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. GRAND HYATT TAMPA BAY		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 2900 BAYPORT DRIVE		Amount of Each Disbursement this Period 900.00
City TAMPA	State FL	
Purpose of Disbursement ROBINSON REIMBURSEMENT: TRAVEL: PARKING		Transaction ID : SB17.4256
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. GULF		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 7120 SOUTHGATE BLVD.		Amount of Each Disbursement this Period 7.34
City NORTH LAUDERDALE	State FL	
Purpose of Disbursement WILCOX REIMBURSEMENT: TRAVEL: FOOD		Transaction ID : SB17.4205
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. SOHAIL HALANI		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 11018 ULLSWATER LANE		Amount of Each Disbursement this Period 900.00
City WINDERMERE	State FL	
Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING SERVICES		Transaction ID : SB17.4601
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

201510190200277837

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. HERTZ RENT-A-CAR

Mailing Address 160 AVIATION DRIVE N

City State Zip Code
NAPLES FL 34104

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	08 / 28 / 2015
----------------	----------------

Amount of Each Disbursement this Period

278.42

Transaction ID : SB17.4195

[MEMO ITEM]

B. HYATT REGENCY JACKSONVILLE

Mailing Address 255 COAST LINE DRIVE EAST

City State Zip Code
JACKSONVILLE FL 32202

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	07 / 31 / 2015
----------------	----------------

Amount of Each Disbursement this Period

5.28

Transaction ID : SB17.4248

[MEMO ITEM]

C. JENNIFER MCDUGALD, LLC

Mailing Address PO BOX 521

City State Zip Code
WINDERMERE FL 34786

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	07 / 31 / 2015
----------------	----------------

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4172

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

1500.00

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

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201510190200277838

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. JENNIFER MCDUGALD, LLC		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address PO BOX 521		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4189
City WINDERMERE	State FL	
Zip Code 34786	Purpose of Disbursement IN-KIND: FUNDRAISING CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. JENNIFER MCDUGALD, LLC		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address PO BOX 521		Amount of Each Disbursement this Period 25.74 Transaction ID : SB17.4275
City WINDERMERE	State FL	
Zip Code 34786	Purpose of Disbursement REIMBURSEMENTS: SEE MEMOS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. JENNIFER MCDUGALD, LLC		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address PO BOX 521		Amount of Each Disbursement this Period 148.96 Transaction ID : SB17.4276
City WINDERMERE	State FL	
Zip Code 34786	Purpose of Disbursement TRAVEL: MILEAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1174.70
TOTAL This Period (last page this line number only).....	

201510190200277839

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. JENNIFER MCDUGALD, LLC

Mailing Address PO BOX 521

Date of Disbursement

M M / D D / Y Y Y Y
09 / 04 / 2015

City State Zip Code
WINDERMERE FL 34786

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
FUNDRAISING CONSULTING

--

Transaction ID : SB17.4277

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. JOE ROBINSON, LLC

Mailing Address 7317 LISMORE COURT

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2015

City State Zip Code
ORLANDO FL 32835

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
FIELD CONSULTING

--

Transaction ID : SB17.4155

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. JOE ROBINSON, LLC

Mailing Address 7317 LISMORE COURT

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2015

City State Zip Code
ORLANDO FL 32835

Amount of Each Disbursement this Period

221.96

Purpose of Disbursement
REIMBURSEMENTS: SEE MEMOS

--

Transaction ID : SB17.4278

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

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

8221.96

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

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201510190200277840

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. JOE ROBINSON, LLC

Mailing Address 7317 LISMORE COURT

City ORLANDO State FL Zip Code 32835

Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
09	04	2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4156

B. JOE ROBINSON, LLC

Mailing Address 7317 LISMORE COURT

City ORLANDO State FL Zip Code 32835

Purpose of Disbursement
REIMBURSEMENTS: SEE MEMOS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
09	04	2015

Amount of Each Disbursement this Period

109.64

Transaction ID : SB17.4279

C. JOE ROBINSON, LLC

Mailing Address 7317 LISMORE COURT

City ORLANDO State FL Zip Code 32835

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
09	04	2015

Amount of Each Disbursement this Period

127.68

Transaction ID : SB17.4280

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

5237.32

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

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201510190200277841

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

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

FOR LINE NUMBER:
(check only one)

PAGE 77 OF 91

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. LIBERTY GARAGE

Full Name (Last, First, Middle Initial)
Mailing Address 112 E CENTRAL AVE.

City ORLANDO State FL Zip Code 32801

Purpose of Disbursement
MCDUGALD REIMBURSEMENT: TRAVEL: PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
6.00

Transaction ID : SB17.4270

[MEMO ITEM]

B. MR. GEORGE LIVINGSTON

Full Name (Last, First, Middle Initial)
Mailing Address 1800 PEMBROOK DRIVE SUITE 350

City ORLANDO State FL Zip Code 32810

Purpose of Disbursement
IN-KIND: FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 09 / 2015

Amount of Each Disbursement this Period
151.39

Transaction ID : SB17.4178

C. MAGNOLIA POINT GOLF & COUNTRY CLUB

Full Name (Last, First, Middle Initial)
Mailing Address 3670 CLUBHOUSE DRIVE

City GREEN COVE SPRINGS State FL Zip Code 32043

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
25.40

Transaction ID : SB17.4262

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 151.39

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

201510190200277842

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. MILLENNIUM CONSULTING Full Name (Last, First, Middle Initial) Mailing Address P.O.BOX 568926 City ORLANDO State FL Zip Code 32856 Purpose of Disbursement STRATEGY CONSULTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015 Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.4158 Category/ Type
---	--	--

B. NICEBADGE Full Name (Last, First, Middle Initial) Mailing Address 1710 HARBECK RD. City GRANTS PASS State OR Zip Code 97527 Purpose of Disbursement WILCOX REIMBURSEMENT: OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015 Amount of Each Disbursement this Period 25.90 Transaction ID : SB17.4227 [MEMO ITEM]
---	--	---

C. MR. SAL NUNZIATA Full Name (Last, First, Middle Initial) Mailing Address 2351 FORREST ROAD City WINTER PARK State FL Zip Code 32789 Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		Date of Disbursement MM / DD / YYYY 08 / 27 / 2015 Amount of Each Disbursement this Period 530.00 Transaction ID : SB17.4187
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SUBTOTAL of Disbursements This Page (optional).....

4530.00

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

201510190200277843

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 1395 SE 17TH ST.

City State Zip Code
FORT LAUDERDALE FL 33316

Purpose of Disbursement
WILCOX REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 28 / 2015

Amount of Each Disbursement this Period

720.00

Transaction ID : SB17.4203

[MEMO ITEM]

B. OLYMPUS LIMO INC

Mailing Address 8020 MASS AVE.

City State Zip Code
NEW PORT RICHEY FL 34653

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 28 / 2015

Amount of Each Disbursement this Period

231.00

Transaction ID : SB17.4197

[MEMO ITEM]

C. JACQUELINE PAGE

Mailing Address 25 EMILY LANE

City State Zip Code
PEABODY MA 01960

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 28 / 2015

Amount of Each Disbursement this Period

720.00

Transaction ID : SB17.4153

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

720.00

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

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201510190200277844

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 91			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. MR. CHRIS PONTE		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 13505 ICOT BLVD. STE 214		Amount of Each Disbursement this Period 454.75 Transaction ID : SB17.4184
City CLEARWATER State FL Zip Code 33760	Purpose of Disbursement IN-KIND: FACILITY RENTAL/CATERING SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. POST OFFICE-ORLO VISTA		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 501 S KIRKMAN ROAD		Amount of Each Disbursement this Period 82.00 Transaction ID : SB17.4242
City ORLANDO State FL Zip Code 32811	Purpose of Disbursement ROBINSON REIMBURSEMENT: PO BOX	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. POST OFFICE-WINDERMERE		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 9300 CONROY WINDERMERE ROAD		Amount of Each Disbursement this Period 11.44 Transaction ID : SB17.4266
City WINDERMERE State FL Zip Code 34786	Purpose of Disbursement ROBINSON REIMBURSEMENT: POSTAGE	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	454.75
TOTAL This Period (last page this line number only).....	

201510190200277845

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. POST OFFICE-WINDERMERE

Mailing Address 9300 CONROY WINDERMERE ROAD

Date of Disbursement

M M / D D / Y Y Y Y
09 / 04 / 2015

City State Zip Code
WINDERMERE FL 34786

Amount of Each Disbursement this Period

1.20

Purpose of Disbursement
MCDUGALD REIMBURSEMENT: POSTAGE

Category/ Type

Transaction ID : SB17.4271

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. PROPARK AMERICA

Mailing Address 255 COAST LINE DRIVE EAST

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2015

City State Zip Code
JACKSONVILLE FL 32202

Amount of Each Disbursement this Period

12.00

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: PARKING

Category/ Type

Transaction ID : SB17.4250

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
2ND FLOOR

Date of Disbursement

M M / D D / Y Y Y Y
07 / 20 / 2015

City State Zip Code
BEVERLY MA 01915

Amount of Each Disbursement this Period

2750.00

Purpose of Disbursement
COMPLIANCE CONSULTING

Category/ Type

Transaction ID : SB17.4160

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

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

2750.00

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

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201510190200277846

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 5516.53 Transaction ID : SB17.4161
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 08 / 10 / 2015
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.4162
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 138 CONANT STREET 2ND FLOOR		Amount of Each Disbursement this Period 5521.45 Transaction ID : SB17.4163
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

16537.98

201510190200277847

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. REPUBLICAN PARTY OF PALM BEACH COUNTY		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1555 PALM BEACH LAKE BLVD. SUITE 120		Amount of Each Disbursement this Period 50.00
City WEST PALM BEACH	State FL Zip Code 33401	
Purpose of Disbursement ROBINSON REIMBURSEMENT: TRAVEL: MEAL		Transaction ID : SB17.4230
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. REPUBLICAN PARTY OF PALM BEACH COUNTY		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1555 PALM BEACH LAKE BLVD. SUITE 120		Amount of Each Disbursement this Period 500.00
City WEST PALM BEACH	State FL Zip Code 33401	
Purpose of Disbursement EVENT REGISTRATION FEE		Transaction ID : SB17.4165
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 2501 NW 42ND AVE.		Amount of Each Disbursement this Period 2.19
City MIAMI	State FL Zip Code 33142	
Purpose of Disbursement ROBINSON REIMBURSEMENT: TRAVEL: FUEL		Transaction ID : SB17.4232
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

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

500.00

201510190200277848

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 4395 TAMIAMI TRAIL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2015

City PORT CHARLOTT State FL Zip Code 33980

Amount of Each Disbursement this Period

6.89

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: FUEL

--

Transaction ID : SB17.4236

Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

B. SHELL

Mailing Address 1002 N WEST SHORE BL.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2015

City TAMPA State FL Zip Code 33607

Amount of Each Disbursement this Period

7.19

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: FUEL

--

Transaction ID : SB17.4238

Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

C. SHELL

Mailing Address 940 POST ST.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2015

City JACKSONVILLE State FL Zip Code 32204

Amount of Each Disbursement this Period

25.06

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: FUEL

--

Transaction ID : SB17.4209

Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

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

0.00

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

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201510190200277849

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

A. SONNY'S REAL PIT BBQ

Full Name (Last, First, Middle Initial)
Mailing Address 15800 US HWY 441

City EUSTIS State FL Zip Code 32726

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2015

Amount of Each Disbursement this Period
23.89

Transaction ID : SB17.4244

[MEMO ITEM]

B. SQUARE, INC.

Full Name (Last, First, Middle Initial)
Mailing Address 110 5TH STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 23 / 2015

Amount of Each Disbursement this Period
189.15

Transaction ID : SB17.4171

C. STARBUCKS

Full Name (Last, First, Middle Initial)
Mailing Address 4100 GEORGE J BEAN PKWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: FOOD

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 04 / 2015

Amount of Each Disbursement this Period
8.09

Transaction ID : SB17.4252

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 189.15

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

201510190200277850

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. T-MOBILE

Mailing Address 12920 SE 38TH ST.

City State Zip Code
BELLEVUE WA 98006

Purpose of Disbursement
WILCOX REIMBURSEMENT: MOBILE PHONE EXPENSE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period

32.35

Transaction ID : SB17.4225

[MEMO ITEM]

B. THE COLONNADE RESTAURANT

Mailing Address 3401 BAYSHORE BLVD.

City State Zip Code
TAMPA FL 33629

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period

19.86

Transaction ID : SB17.4217

[MEMO ITEM]

C. THE GRIDDLE

Mailing Address 475 NE SPANISH RIVER BLVD.

City State Zip Code
BOCA RATON FL 33431

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: MEAL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period

37.07

Transaction ID : SB17.4219

[MEMO ITEM]

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

0.00

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

201510190200277851

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

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

FOR LINE NUMBER:
(check only one)

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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)
A. UNITED AIRLINES, INC.

Mailing Address 233 S WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period
1502.80

Transaction ID : SB17.4229

[MEMO ITEM]

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

Mailing Address 4000 E SKY HARBOR BLVD.

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
WILCOX REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 28 / 2015

Amount of Each Disbursement this Period
427.20

Transaction ID : SB17.4213

[MEMO ITEM]

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

Mailing Address 2600 S KIRKMAN RD.

City ORLANDO State FL Zip Code 32811

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2015

Amount of Each Disbursement this Period
22.31

Transaction ID : SB17.4246

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

201510190200277852

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial)

A. TODD WILCOX

Mailing Address PO BOX 616308

City State Zip Code
ORLANDO FL 32861

Purpose of Disbursement
REIMBURSEMENTS: SEE MEMOS

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: FL District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 28 / 2015

Amount of Each Disbursement this Period

3583.03

Transaction ID : SB17.4274

Full Name (Last, First, Middle Initial)

B. TODD WILCOX

Mailing Address PO BOX 616308

City State Zip Code
ORLANDO FL 32861

Purpose of Disbursement
IN-KIND: TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: FL District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Amount of Each Disbursement this Period

12767.95

Transaction ID : SB17.4603

Full Name (Last, First, Middle Initial)

C. ZELLWOOD EXXON MOBIL

Mailing Address 4496 NORTH ORANGE BLOSSOM TRAIL

City State Zip Code
ZELLWOOD FL 32797

Purpose of Disbursement
ROBINSON REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 04 / 2015

Amount of Each Disbursement this Period

26.66

Transaction ID : SB17.4260

[MEMO ITEM]

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

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

16350.98
74459.68

201510190200277853

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

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

FOR LINE NUMBER:
(check only one)

PAGE 89 OF 91

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Todd Wilcox for US Senate

Full Name (Last, First, Middle Initial) A. MR. J PATRICK MICHAELS		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 101 EAST KENNEDY BOULEVARD SUITE 3300		Amount of Each Disbursement this Period 300.00
City TAMPA	State FL Zip Code 33602	
Purpose of Disbursement CONTRIBUTION REFUND		Transaction ID : SB20A.4174
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Transaction ID
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Transaction ID
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	300.00

201510190200277854

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Todd Wilcox for US Senate** Transaction ID : **SC/10.4190**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2016
TODD WILCOX Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 616308

City State ZIP Code
ORLANDO FL 32861

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100000.00 0.00 100000.00

TERMS Date Incurred Date Due Interest Rate Secured:
06 / 18 / 2015 / / 12/31/2018 / 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)... 100000.00
TOTALS This Period (last page in this line only)...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201510190200277855

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Todd Wilcox for US Senate** Transaction ID : **SC/10.4191**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2016
TODD WILCOX Primary
Mailing Address General
PO BOX 616308 Other (specify) ▼

City State ZIP Code
ORLANDO FL 32861

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
400000.00 0.00 400000.00

TERMS Date Incurred Date Due Interest Rate Secured:
09 / 30 / 2015 M M / D D / 12/31/2018 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)... ▶ 400000.00
TOTALS This Period (last page in this line only)... ▶ 500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201510190200277856

Insert shipping document here.

ORIGIN ID:MXGA (817) 231-4353
C/O RED CURVE SOLUTIONS
TERRILYNN LAND FOR SENATE
138 CONANT ST
2ND FLOOR
BEVERLY, MA 01915
UNITED STATES US

SHIP DATE: 14OCT15
ACTWGT: 0.10 LB
CAD: 105853717/ANET3670

BILL SENDER

TO OFFICE OF PUBLIC RECORDS
SECRETARY OF THE SENATE
232 SENATE HART OFFICE BUILDING

WASHINGTON DC 20510
(202) 694-1000
REF: TERRILYNN LAND FOR US SENATE
DEPT:

538J0401AG1D0



FedEx Ship Manager - Print Your Label(s)

TRK# 0201 7747 3739 2051
THU - 15 OCT 10:30A
PRIORITY OVERNIGHT

EP YKNA 20510 IAD
DC US



Received by 13
Senate Post Office

OCT 15 2015

this label

201510190200277857

2051
10:30
2

729



United States Senate
Post Office

OPENED
FOR
INSPECTION



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>10/14/15</u>	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

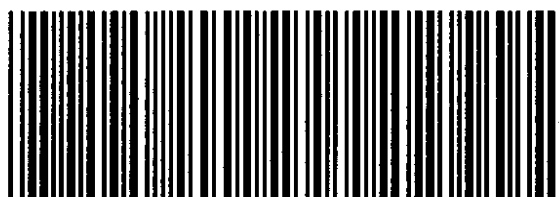
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

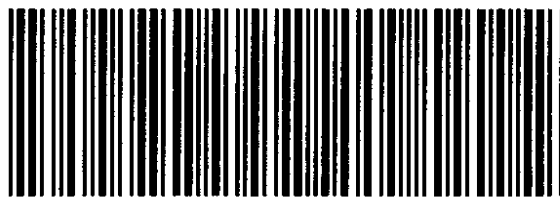
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 10-19-15

201510190200277858



SEN PATCH



SEN PATCH

201510190200277859