

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Frederica S. Wilson for Congress

ADDRESS (number and street) 19821 NW 2nd Ave.
Box 354
 Check if different than previously reported. (ACC) Miami Gardens FL 33169

2. **FEC IDENTIFICATION NUMBER** C C00460055 CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A) FL 24

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

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 / 01 / 2013 through 12 / 31 / 2013

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 Mr. Larry Handfield
Signature of Treasurer Mr. Larry Handfield [Electronically Filed] Date M M / D D / Y Y Y Y
01 / 31 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Frederica S. Wilson for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	43520.00	153655.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	43520.00	153655.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16988.60	93424.87
(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)).....	16988.60	93424.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	151204.76	
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).....	15906.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Frederica S. Wilson for Congress

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

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).....	10475.00	14725.00
(ii) Unitemized.....	5545.00	5930.00
(iii) TOTAL of contributions from individuals ▶	16020.00	20655.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	27500.00	133000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	43520.00	153655.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
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)..... ▶	43520.00	153655.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16988.60	93424.87
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	450.00	1000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	17438.60	94424.87

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	125123.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	43520.00
25. SUBTOTAL (add Line 23 and Line 24).....	168643.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17438.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	151204.76

**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 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Herickson Accime

Mailing Address 601 NE 36 Street
Apt 1510

City Miami State FL Zip Code 33137

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

Name of Employer New Urban Works Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442882

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1625 Eagle Bnd

City Weston State FL Zip Code 33327-1615

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442915

Amount of Each Receipt this Period
500.00

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

Mailing Address 3017 Birkdale

City Weston State FL Zip Code 33332-1813

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

Name of Employer Solowsky & Allen Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2013

Transaction ID : C8414443

Amount of Each Receipt this Period
500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Clifford J. Bauer

Mailing Address 401 NW 131st Avenue

City Fort Lauderdale	State FL	Zip Code 33325
-------------------------	-------------	-------------------

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

Name of Employer Miami Jewish Health Systems	Occupation Sr. Vice President-Operation
---	--

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2013

Transaction ID : C8414439

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Rene D. Beal

Mailing Address 1311 Granada Blvd

City Coral Gables	State FL	Zip Code 33134-2452
----------------------	-------------	------------------------

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

Name of Employer Self	Occupation Realtor
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 19 / 2013

Transaction ID : C8443137

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Evalina W. Bestman

Mailing Address 9230 NW 13th Ct

City Miami	State FL	Zip Code 33147
---------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Psychologist
-----------------------------------	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442894

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 32
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Vanessa Byers

Mailing Address 1221 NW 99 St.

City Miami State FL Zip Code 33147

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

Name of Employer Miami-Dade County Public Schools Occupation Budget Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442881

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Y Cash Jackson

Mailing Address 1411 NW 50th St

City Miami State FL Zip Code 33142-4161

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

Name of Employer Becker & Poliakoff Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : C8425125

Amount of Each Receipt this Period
 500.00

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

Mailing Address 10225 Collins Avenue
Apartment 1901

City Miami Beach State FL Zip Code 33154

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

Name of Employer Miami Jewish Health Systems Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2013

Transaction ID : C8414410

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 32
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Kim McCray

Mailing Address 17413 SW 22 Street

City Miramar State FL Zip Code 33029

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

Name of Employer McCray & Associates Occupation Government Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : C8453236

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2001 Hamilton St
Apt 2028

City Philadelphia State PA Zip Code 19130-4214

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

Name of Employer Self Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : C8443131

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2425 L St NW
Apt 314

City Washington State DC Zip Code 20037-2432

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

Name of Employer The Cormac Group, LLP Occupation Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013

Transaction ID : C8410201

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 32
	<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)
Frederica S. Wilson for Congress

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

Mailing Address 14327 Garden Dr

City Miami State FL Zip Code 33168

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442925

Amount of Each Receipt this Period
250.00

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

Mailing Address 7150 Biscayne Blvd.

City Miami State FL Zip Code 33138

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

Name of Employer Information Requested Occupation Information Requested

King Motel Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442912

Amount of Each Receipt this Period
500.00

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

Mailing Address 12705 Ne 4 Ave.

City North Miami State FL Zip Code 33161

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

Name of Employer Information Requested Occupation Information Requested

Self-Employed Pastor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2013

Transaction ID : C8453237

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Ellen Solowsky

Mailing Address 2127 Brickell Avenue
Apt 3501

City Miami State FL Zip Code 33129

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013

Transaction ID : C8414445

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1010 Seminole Drive
Apt 1108

City Fort Lauderdale State FL Zip Code 33304-3649

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

Name of Employer Town Center Properties Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8466082

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Rosetta J. Vickers

Mailing Address 1050 NW 87 St.

City Miami State FL Zip Code 33150

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

Name of Employer Zeta Community Center Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : C8442886

Amount of Each Receipt this Period
 225.00

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

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

1225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 32
	<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)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Mark R. Vogel

Mailing Address 3389 Sheridan St.
Ste. 424

City Hollywood State FL Zip Code 33021

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : C8415409

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

10475.00

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

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

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
American Association for Justice PAC

Mailing Address **777 6 Street, NW**
Suite 200

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : C8443102

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address **325 7th Street, NW**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : C8443105

Amount of Each Receipt this Period
1000.00

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

Mailing Address **1505 PRINCE STREET**
SUITE 300

City **ALEXANDRIA** State **VA** Zip Code **22314**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : C8443099

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
AT&T Federal PAC

Mailing Address 208 S. Akard St.
Ste. 3521

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : C8443107

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Comcast Corporation PAC

Mailing Address 1701 JFK Blvd.

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : C8443121

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DAVITA INC POLITICAL ACTION COMMITTEE ('DAVITA')

Mailing Address 601 HAWAII STREET

City EL SEGUNDO State CA Zip Code 90245

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : C8443116

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)

Mailing Address 6700 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : C8453232

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
GRIDIRON-PAC

Mailing Address 280 PARK AVENUE

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00451153

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : C8453231

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT

Mailing Address 800 17TH STREET, NW
SUITE 1100

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : C8443111

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00235853**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : C8443108

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : C8459080

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE

Mailing Address 714 GREEN VALLEY ROAD

City GREENSBORO State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C C00112888**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : C8443110

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ACTION COMMITTEE (NACPAC)

Mailing Address 3389 SHERIDAN ST.
#424

City State Zip Code
HOLLYWOOD FL 33021

FEC ID number of contributing federal political committee. **C** C00147983

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 29 / 2013

Transaction ID : C8415410

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 Massachusetts Ave., NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 29 / 2013

Transaction ID : C8415405

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2013

Transaction ID : C8453225

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 17 OF 32
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS
 Mailing Address 430 NORTH MICHIGAN AVENUE
 City State Zip Code
 CHICAGO IL 60611
 FEC ID number of contributing federal political committee. **C C00030718**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013
Transaction ID : C8453228
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
SEABOARD CORPORATION POLITICAL ACTION COMMITTEE
 Mailing Address 9000 WEST 67TH STREET
 City State Zip Code
 SHAWNEE MISSION KS 66201
 FEC ID number of contributing federal political committee. **C C00246736**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 19 / 2013
Transaction ID : C8443100
 Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Service Employees International Union C.O.P.E.
 Mailing Address 1800 Massachusetts Ave. NW
 City State Zip Code
 Washington DC 20036
 FEC ID number of contributing federal political committee. **C C00004036**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013
Transaction ID : C8462159
 Amount of Each Receipt this Period
 1000.00

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 32
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Transport Workers Union Political Contributions Co

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013

Transaction ID : C8414405

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Transport Workers Union Political Contributions Co

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013

Transaction ID : C8467459

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address 8000 EAST JEFFERSON

City DETROIT State MI Zip Code 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : C8453229

Amount of Each Receipt this Period
 2000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address **1775 K STREET N.W.**

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00002766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 29 2013

Transaction ID : C8415408

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
UNITED MINE WORKERS OF AMERICA COAL MINERS POLITIC

Mailing Address **18354 QUANTICO GATEWAY DR SUITE 200**

City State Zip Code
TRIANGLE VA 22172

FEC ID number of contributing federal political committee. **C C00013342**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 15 2013

Transaction ID : C8410782

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
UNITED MINE WORKERS OF AMERICA COAL MINERS POLITIC

Mailing Address **18354 QUANTICO GATEWAY DR SUITE 200**

City State Zip Code
TRIANGLE VA 22172

FEC ID number of contributing federal political committee. **C C00013342**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 19 2013

Transaction ID : C8443104

Amount of Each Receipt this Period
1000.00

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

3000.00

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

**SCHEDULE 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 21 OF 32	
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4500.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting - Fundraising and Compliance Category/Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Transaction ID : D542269

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 25.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Phone Expenses Category/Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Transaction ID : D542270

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4500.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting - Fundraising and Compliance Category/Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Transaction ID : D544330

SUBTOTAL of Disbursements This Page (optional).....	9025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 32		
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 49.84 Transaction ID : D544332
City Washington State DC Zip Code 20003	Purpose of Disbursement Phone, Postage, and Supply Expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 4052.36 Transaction ID : D547176
City Washington State DC Zip Code 20003	Purpose of Disbursement Camapign Fundraising and Compliance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 61.64 Transaction ID : D547177
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Office Supplies, and Trasportation	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4163.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 32			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Bank of America, NA			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013		
Mailing Address 201 Pennsylvania Ave SE			Amount of Each Disbursement this Period 75.43		
City Washington	State DC	Zip Code 20003	Transaction ID : D554040		
Purpose of Disbursement Bank Fee		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. Bank of America, NA			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013		
Mailing Address 201 Pennsylvania Ave SE			Amount of Each Disbursement this Period 12.00		
City Washington	State DC	Zip Code 20003	Transaction ID : D554041		
Purpose of Disbursement Bank Fee		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) c. Bank of America, NA			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013		
Mailing Address 201 Pennsylvania Ave SE			Amount of Each Disbursement this Period 73.90		
City Washington	State DC	Zip Code 20003	Transaction ID : D547173		
Purpose of Disbursement Bank Fee		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	161.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 32			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Bank of America, NA		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 201 Pennsylvania Ave SE		Amount of Each Disbursement this Period 95.83
City Washington State DC Zip Code 20003	Purpose of Disbursement Bank Fee	
Candidate Name	Category/Type	Transaction ID : D547174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Benjamin Payen		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address P.O. Box 825482		Amount of Each Disbursement this Period 300.00
City South Florida State FL Zip Code 33082	Purpose of Disbursement Campaign Event Sound	
Candidate Name	Category/Type	Transaction ID : D554536
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 347.34
City Washington State DC Zip Code 20003	Purpose of Disbursement Travel Expense	
Candidate Name	Category/Type	Transaction ID : D542271
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	743.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 32			
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 619616		Amount of Each Disbursement this Period 302.44
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel Expense	Transaction ID : D542282
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 718.20
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Campaign Food and Beverage Expense	Transaction ID : D544331
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sonoma Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 223 Pennsylvania Ave SE		Amount of Each Disbursement this Period 718.20
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Campaign Food and Beverage Expense	Transaction ID : D544334
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	718.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 32	
	<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)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 1524.06
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Travel Expenses	
Candidate Name	Category/Type	Transaction ID : D544333
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Embassy Suites		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 900 10th Street NW		Amount of Each Disbursement this Period 1076.32
City Washington State DC Zip Code 20001	Purpose of Disbursement Campaign Travel Expense	
Candidate Name	Category/Type	Transaction ID : D544335 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Walt Disney World Resort		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 1700 Epcot Resorts Blvd		Amount of Each Disbursement this Period 447.74
City Orlando State FL Zip Code 32830	Purpose of Disbursement Campaign Travel Expense	
Candidate Name	Category/Type	Transaction ID : D544338 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1524.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 499 S. Capitol St. SW Suite 422		Amount of Each Disbursement this Period 652.60
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Food and Beverage and Phone Usages Expense	
Candidate Name	Category/Type	Transaction ID : D554067
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 627.60
City Washington State DC Zip Code 20003	Purpose of Disbursement Campaign Food and Beverage Expense	
Candidate Name	Category/Type	Transaction ID : D554068 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	652.60
TOTAL This Period (last page this line number only).....	16988.20

**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 28 OF 32			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Frederica S. Wilson for Congress

Full Name (Last, First, Middle Initial) A. Miami-Dade Democratic Party		Date of Disbursement
Mailing Address 3637 SW 23rd St		M M / D D / Y Y Y Y 11 / 07 / 2013
City Miami	State FL	Zip Code 33145-3020
Purpose of Disbursement Donation	Amount of Each Disbursement this Period 200.00	
Candidate Name	Transaction ID : D547175	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Miami-Dade Democratic Party		Date of Disbursement
Mailing Address 3637 SW 23rd St		M M / D D / Y Y Y Y 10 / 24 / 2013
City Miami	State FL	Zip Code 33145-3020
Purpose of Disbursement Donation	Amount of Each Disbursement this Period 250.00	
Candidate Name	Transaction ID : D544329	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	450.00

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)

Transaction ID : L390

Frederica S. Wilson for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

Ms. Frederica S Wilson PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address
1018 NW 204 St

City State ZIP Code
Miami FL 33169

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
250.00 0.00 250.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03

13

2009

No due date

None

% (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)..... 250.00

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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Frederica S. Wilson for Congress** Transaction ID : **L575**

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2010
Ms. Frederica S Wilson PERS FUNDS Primary
 Mailing Address 1018 NW 204 St General
 Other (specify) ▼

City State ZIP Code
 Miami FL 33169

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4500.00	0.00	4500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2009	M / D / No Due Date	None % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	4500.00
TOTALS This Period (last page in this line only).....	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Frederica S. Wilson for Congress** Transaction ID : **L579**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Ms. Frederica S Wilson PERS FUNDS
 Election: 2010
 Primary
 General
 Other (specify) ▼

Mailing Address
1018 NW 204 St

City State ZIP Code
Miami FL 33169

Original Amount of Loan 50000.00	Cumulative Payment To Date 39500.00	Balance Outstanding at Close of This Period 10500.00
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TERMS

Date Incurred: M 08 / D 20 / Y 2010
 Date Due: M / D / Y None
 Interest Rate: None % (apr)
 Secured: 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).....	▶	10500.00
TOTALS This Period (last page in this line only).....	▶	15250.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Frederica S. Wilson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Political Development Group

Mailing Address 499 South Capitol St SW
Ste 422

City State Zip Code
Washington DC 20003

Nature of Debt (Purpose):
Event Food and Beverage Expense

Outstanding Balance Beginning This Period **656.00** Transaction ID : D534939

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **656.00**

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

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

1) SUBTOTALS This Period This Page (optional)	656.00
2) TOTALS This Period (last page this line number only)	656.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	15250.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	15906.00