

**FEC FORM 3X**

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

RECEIVED  
FEC MAIL CENTER  
2008 JUL 15 AM 11:22

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

STRONG PARTY - ORG POLITICAL ACTION

ADDRESS (number and street) ▼

P.O. BOX 010230

Check if different than previously reported. (ACC)

MIAMI

FL

33101-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

00427625

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

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

Election on

MM / DD / YYYY

in the State of

State

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

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

Election on

MM / DD / YYYY

in the State of

State

5. Covering Period

MM / DD / YYYY  
04 / 01 / 2008

through

MM / DD / YYYY  
06 / 30 / 2008

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

SCOTT A. WACHOLTZ

Signature of Treasurer

*Scott A. Wacholtz* Date

MM / DD / YYYY  
07 / 14 / 2008

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

FEC FORM 3X  
Rev. 12/2004

28039773780

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

STRONG PARTY. ORG POLITICAL ACTION

Report Covering the Period: From:

04 / 01 / 2008

To:

06 / 30 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2008</u>		<u>16,131.15</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>13,448.36</u>	
(c) Total Receipts (from Line 19).....	<u>2,500.00</u>	<u>8,801.71</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>15,948.36</u>	<u>24,932.86</u>
7. Total Disbursements (from Line 31).....	<u>9,709.01</u>	<u>18,693.51</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>6,239.35</u>	<u>6,239.35</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	

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

**For further information contact:**

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

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

28039773781

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

STRONG PARTY.ORG POLITICAL ACTION

Report Covering the Period: From: 04 / 01 / 2008 To: 06 / 30 / 2008

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

250000

770500

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

250000

770500

(b) Political Party Committees.....

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

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

250000

877996

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

2175

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

250000

880171

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

250000

880171

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**DETAILED SUMMARY PAGE**  
of Disbursements

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	1,659.01	8,393.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1,659.01	8,393.51
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	7,550.00	8,300.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....	500.00	2,000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9,709.01	18,693.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	9,709.01	18,693.51

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2,500.00	8,779.96
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2,500.00	8,779.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1,659.01	8,393.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1,659.01	8,393.51

28039773784

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

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

FOR LINE NUMBER:		PAGE	OF
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**STRONG PARTY.ORG POLITICAL ACTION**

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

Mailing Address  
**1736 W 28th ST**

City **MIAMI BEACH** State **FL** Zip Code **33140-4224**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2,500.00**

Date of Receipt  
**04 / 25 / 2008**

Amount of Each Receipt this Period  
**2,500.00**

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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) ▼

Aggregate Year-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).....▶

**2,500.00**

**2,500.00**

28039773785



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
**STRONG PARTY. OILG POLITICAL ACTION**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement MM/DD/YYYY <b>05/21/2008</b>
Mailing Address		Amount of Each Disbursement this Period <b>63.34</b>
City	State Zip Code	
Purpose of Disbursement <b>TELEPHONE SERVICE</b>	Category/Type <b>001</b>	
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>B. BANK OF AMERICA</b>		Date of Disbursement MM/DD/YYYY <b>05/30/2008</b>
Mailing Address		Amount of Each Disbursement this Period <b>46.95</b>
City	State Zip Code	
Purpose of Disbursement <b>ACCOUNT MAINT SERVICE CHARGE</b>	Category/Type <b>001</b>	
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>C. AMERICAN EXPRESS</b>		Date of Disbursement MM/DD/YYYY <b>06/12/2008</b>
Mailing Address		Amount of Each Disbursement this Period <b>548.53</b>
City	State Zip Code	
Purpose of Disbursement <b>REIMBURSEMENT FOR POLITICAL EVENT</b>	Category/Type <b>007</b>	
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).....▶	<b>658.87</b>
TOTAL This Period (last page this line number only).....▶	

28039773787

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE		OF	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)  
**STRONG PARTY. ONG POLITICAL ACTION**

**A. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  
**TELEPHONE SERVICE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
**06 12 2008**

Amount of Each Disbursement this Period  
**3180**

Category/Type  
**001**

**B. AVIS RENT - A - CAR**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  
**TRAVEL EXPENSE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
**06 17 2008**

Amount of Each Disbursement this Period  
**116.91**

Category/Type  
**002**

**C. US POSTAL SERVICE**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  
**POSTAGE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
**06 25 2008**

Amount of Each Disbursement this Period  
**2500**

Category/Type  
**001**

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

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

**17371**

28039773788

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
**STRONG PARTY. ORG POLITICAL ACTION**

Full Name (Last, First, Middle Initial) <b>A. US POSTAL SERVICE</b>		Date of Disbursement MM / DD / YYYY <b>06 / 25 / 2008</b>
Mailing Address		Amount of Each Disbursement this Period <b>590</b>
City	State Zip Code	
Purpose of Disbursement <b>POSTAGE</b>	Category/Type <b>001</b>	
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>B. BANK OF AMERICA</b>		Date of Disbursement MM / DD / YYYY <b>06 / 30 / 2008</b>
Mailing Address		Amount of Each Disbursement this Period <b>46.95</b>
City	State Zip Code	
Purpose of Disbursement <b>ACCOUNT MAINT. SERVICE CHARGE</b>	Category/Type <b>001</b>	
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>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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).....▶	<b>5285</b>
TOTAL This Period (last page this line number only).....▶	<b>1659.01</b>

28039773789

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
**STRONG PARTY.ORG POLITICAL ACTION**

**A. DAVID VITERA FOR US SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address  
**PO BOX 8175**

City **METairie** State **LA** Zip Code **70011**

Purpose of Disbursement  
**CAMPAIGN CONTRIBUTION**

Candidate Name  
**DAVID VITERA**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **LA** District:

Date of Disbursement  
**04 / 07 / 2008**

Amount of Each Disbursement this Period  
**250.00**

Category/Type  
**011**

**B. LINCOLN DIAZ-BALANT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address  
**95 MERRICK WAY, SUITE 250**

City **CONAL GABLES** State **FL** Zip Code **33134**

Purpose of Disbursement  
**CAMPAIGN CONTRIBUTION**

Candidate Name  
**LINCOLN DIAZ - BALANT**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **FL** District: **21**

Date of Disbursement  
**04 / 15 / 2008**

Amount of Each Disbursement this Period  
**500.00**

Category/Type  
**011**

**C. JOHN MCCAW 2008, INC**

Full Name (Last, First, Middle Initial)

Mailing Address  
**PO BOX 16118**

City **ARLINGTON** State **VA** Zip Code **22215**

Purpose of Disbursement  
**CAMPAIGN CONTRIBUTION**

Candidate Name  
**JOHN MCCAW**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
**04 / 27 / 2008**

Amount of Each Disbursement this Period  
**1,800.00**

Category/Type  
**011**

**SUBTOTAL** of Disbursements This Page (optional).....▶ **2,550.00**

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

28039773790

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

**STRONG PARTY. ORG POLITICAL ACTION**

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. <b>BILIRAKIS FOR CONGRESS</b>		Date of Disbursement 06 / 25 / 2008	
Mailing Address <b>610 S. BOULEVARD</b>		Amount of Each Disbursement this Period <b>2300.00</b>	
City <b>TAMPA</b>	State <b>FL</b>		
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>		Category/ Type <b>011</b>	
Candidate Name <b>GUS BILIRAKIS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>FL</b>	District: <b>9</b>		

B. <b>BILIRAKIS FOR CONGRESS</b>		Date of Disbursement 06 / 25 / 2008	
Mailing Address <b>610 S. BOULEVARD</b>		Amount of Each Disbursement this Period <b>1700.00</b>	
City <b>TAMPA</b>	State <b>FL</b>		
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>		Category/ Type <b>011</b>	
Candidate Name <b>GUS BILIRAKIS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>FL</b>	District: <b>9</b>		

C. <b>VERN BUCHANAN FOR CONGRESS</b>		Date of Disbursement 06 / 25 / 2008	
Mailing Address <b>PO BOX 48928</b>		Amount of Each Disbursement this Period <b>1000.00</b>	
City <b>SANASOTA</b>	State <b>FL</b>		
Purpose of Disbursement <b>CAMPAIGN CONTRIBUTION</b>		Category/ Type <b>011</b>	
Candidate Name <b>VERN BUCHANAN</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>FL</b>	District: <b>13</b>		

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

**5,000.00**

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

**7,550.00**

28039773791

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

**STRONG PARTY.ORG POLITICAL ACTION**

Full Name (Last, First, Middle Initial)

**A.**

**JASON BNODEUR FOR STATE HOUSE**

Mailing Address  
**400 SOUTH PALMETTO AVE**

City **SANFORD** State **FL** Zip Code **32771**

Purpose of Disbursement  
**CAMPAIGN CONTRIBUTION - STATE HOUSE**

Candidate Name  
**JASON BNODEUR**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

500.00

011  
Category/  
Type

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

MM / DD / YYYY

Category/  
Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

MM / DD / YYYY

Category/  
Type

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

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

500.00

500.00

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Federal Election Commission  
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Delivery Confirmation™ or Signature Confirmation™ Label

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7/14/08

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*ED*

PREPARER  
(3/2005)

*7/15/08*

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