
5. Covering Period 10 through 101010102010

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
Craig Engle

| Signature of Treasurer | Electronically Filed by | Craig Engle | Date | 10 | 21 | 2010 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |

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

| Office <br> Use <br> Only |
| :--- |
| FE5AN018 |

Image\# 10931699784
FEC Form 3 (Revised 02/2003)
SUMMARY PAGE
of Receipts and Disbursements
$2 / 21$
Write or Type Committee Name
Friends of Connie Mack

Report Covering the Period:
From:


To:


| $Y$ |
| ---: |
| $Y$ |
| 2010 |

6. Net Contributions (other than loans)
(a) Total Contributions
(other than loans) (from Line 11(e))......
$\square 25796.00$

| $\ldots$ |
| ---: |
| $+\quad 003725.83$ |
| $\ldots .00$ |

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))..
$\square \quad 25796.00$
$\square \quad 903725.83$
7. Net Operating Expenditures
(a) Total Operating Expenditures (from Line 17) $\qquad$
$\square$
$\square 876217.87$
(b) Total Offsets to Operating

Expenditures (from Line 14) $\qquad$
$\square$

| $\ldots \quad 4234.17$ |
| :---: |

(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))........
$\square 31043.37$
871983.70
8. Cash on Hand at Close of Reporting Period (from Line 27) $\qquad$
$\square$
9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D). $\qquad$
$\square$

```
            0.00
```

10. Debts and Obligations Owed BY
the Committee (Itemize all on Schedule C and/or Schedule D). $\qquad$
$\square$0.00

## For further information contact:

> Federal Election Commission 999 E Street, NW
> Washington, DC 20463
> Toll Free 800-424-9530
> Local 202-694-1100

FEC Form 3 (Revised 12/2003)

```
Write or Type Committee Name
```

Friends of Connie Mack


| FEC Form 3 (Revised 02/2003) | Of Disbursements |
| :--- | :--- | :--- | :--- |
| II. DISBURSEMENTS |  |

## Image\# 10931699787

## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5/21 (check only one)
 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)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. American Crystal Sugar Co. PAC

Mailing Address 101 3rd St N Attn Kevinprice

| City | State | Zip Code |
| :--- | :--- | :--- |
| Moorhead | MN | 56560-1952 |
| FEC ID number of contributing | C | C00110338 |
| federal political committee. |  |  |


| Name of Employer |
| :---: |
| Receipt For: $\quad 2010$ $\square$ Primary $\quad$ X General $\square$ Other (specify) $\boldsymbol{\nabla}$ |


|  | Occupation |
| :--- | :--- |
| Election Cycle-to-Date | $\boldsymbol{\nabla}$ |
|  |  |

Date of Receipt


Transaction ID: 01015.C22795
Amount of Each Receipt this Period
5000.00

Receipt

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

| Mailing Address | 325 7th Street, N.W. |  |  |
| :--- | :--- | :--- | :--- |
| City | State | Zip Code |  |
| Washington | DC | 20004 |  |

Date of Receipt


Transaction ID: 01015.C22801
Amount of Each Receipt this Period
$\square 1000.00$

Receipt

Date of Receipt
$\quad \frac{\text { American Optometric Association PAC }}{\text { Mailing Address } 1505 \text { Prince St Ste } 300}$

| City <br> Alexandria | State Zip Code <br> VA $22314-2874$ |
| :---: | :---: |
| FEC ID number of contributing federal political committee. | C 000024968 |
| Name of Employer | Occupation |
| Receipt For: $\quad 2010$$\square \quad$Primary $\quad X$ General <br>  <br> Other (specify) $\boldsymbol{\nabla}$ | Election Cycle-to-Date $\boldsymbol{\nabla}$  <br>  2000.00 |



Transaction ID: 01007.C22777
Amount of Each Receipt this Period
$\square, 1000.00$

Receipt

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

## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6/21 (check only one)



Full Name (Last, First, Middle Initial)
A. Atlas Air Worldwide Holdings Inc PAC

| Atlas Air Worldwide Holdings Inc PAC |  |  |  |
| :--- | :--- | :--- | :---: |
| Mailing Address | 2000 Westchester Ave |  |  |
| City | State | Zip Code |  |
| Purchase | NY | 10577 |  |
| FEC ID number of contributing <br> federal political committee. | C | C00478099 |  |


| Name of Employer |
| :---: |
| Receipt For: $\quad 2010$ $\square$ Primary $\quad$ X General $\square$ Other (specify) $\nabla$ |


| Occupation |
| :--- | :--- |
| Election Cycle-to-Date |

Date of Receipt


Transaction ID: 01015.C22799
Amount of Each Receipt this Period
$\square 1000.00$

Receipt

Full Name (Last, First, Middle Initial)
B. Kellogg Better Govt. Committee

| Kellogg Better Govt. Committee |  |  |
| :--- | :--- | :--- |
| Mailing Address | P. O. Box 3599 |  |
| City | State | Zip Code |
| Battle Creek | MI | 49016 |
| FEC ID number of contributing <br> federal political committee. | C | C00039552 |


| Name of Employer |  |
| :--- | :--- |
| $\begin{array}{l}\text { Receipt For: } \quad 2010 \\ \square \\ \square \\ \text { Primary } \quad X \text { General } \\ \text { Other (specify) } \boldsymbol{\nabla}\end{array}$ |  |



Date of Receipt

|  |  |  |
| :---: | :---: | :---: |
| 10 | $01$ | $2010$ |

## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7/21 (check only one)


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NAME OF COMMITTEE (In Full)
FFriends of Connie Mack


## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8/21 (check only one)


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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
A.

| Full Name (Last, First, Middle Initial) |
| :--- |
| Joe Lee |
| Mailing Address |
|  |
| 7550 Hinson St Apt 12C |
|  |
| City |
| Orlando |


| Name of Employer <br> retired |
| :--- | :--- |
| Receipt For: $\quad$ 2010 <br> $\square$ <br> $\square$ <br> Primary $\quad X$ General <br> Other (specify) $\nabla$ |


| lle\| |
| :--- |
| Occupation <br> retired |
| Election Cycle-to-Date $\boldsymbol{\nabla}$ |

Date of Receipt

Transaction ID: 01015.C22792
Amount of Each Receipt this Period

Receipt
B. Paul W. Lynch
Full Name (Last, First, Middle Initial)

| Mailing Address 1215 Kasamada Dr. |
| :--- |
| City |
| Fort Myers |
| FEC ID number of contributing <br> federal political committee. <br> Name of Employer <br> LTP Management <br> Receipt For: $\quad 2010$ <br> $\square$ <br> Primary $\quad$ X General <br> Other (specify) $\nabla$ |

Date of Receipt

Transaction ID: 01015.C22788
Amount of Each Receipt this Period
$\square, 2400.00$

## Receipt

## Date of Receipt



Transaction ID: 01015.C22800
Amount of Each Receipt this Period
$\square 1000.00$

Receipt
5800.00
$\ldots \ldots \ldots$

## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9/21 (check only one)


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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
A.

Full Name (Last, First, Middle Initial)

| A. | Full Name (Last, First, Middle Initial) John J. Poelker |  | Date of Receipt <br> Transaction ID: 01015.C22796 |
| :---: | :---: | :---: | :---: |
|  | Mailing Address 16081 Amberwood Lake Ct Apt 2 |  |  |
|  | City | State Zip Code |  |
|  | Fort Myers | FL 33908-3228 | Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee. | C | $100.00$ |
|  | Name of Employer Apple Transportation | Occupation president | Receipt |
|  | Receipt For: $\quad 2010$ $\square$ $\square$ Primary $\quad$ X $\square$ Other (specify) $\nabla$ | Election Cycle-to-Date |  |
| B. | Full Name (Last, First, Middle Initial) Dale R. Regnier |  | Date of Receipt |
|  | Mailing Address 981 Wittman Drive |  |  |
|  | City | State Zip Code <br> FL 33919 | Transaction ID: 01015.C22787 |
|  | Fort Myers |  | Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee. | C , , , , , , | $2400.00$ |


|  | Mailing Address 16081 Amberwood Lake Ct Apt 2 |  |  <br> Transaction ID: 01015.C22796 |
| :---: | :---: | :---: | :---: |
|  |  |  |  |
|  | City <br> Fort Myers | State Zip Code <br> FL $33908-3228$ |  |
|  |  |  | Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee. | C , , , , | $\square 100.00$ |
|  | Name of Employer Apple Transportation | Occupation president | Receipt |
|  | Receipt For: $\quad 2010$ $\square$ Primary $\quad \mathrm{X}$ General $\square$ Other (specify) $\nabla$ | Election Cycle-to-Date |  |
| B. | Full Name (Last, First, Middle Initial) Dale R. Regnier |  | Date of Receipt |
|  | Mailing Address 981 Wittman Drive |  |  |
|  | City | State Zip Code | Transaction ID: 01015.C22787 |
|  | Fort Myers | FL 33919 | Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee. | C , , , , , | $2400.00$ |


|  | Mailing Address 16081 Amberwood Lake Ct Apt 2 |  |  <br> Transaction ID: 01015.C22796 |
| :---: | :---: | :---: | :---: |
|  |  |  |  |
|  | City <br> Fort Myers | State Zip Code <br> FL $33908-3228$ |  |
|  |  |  | Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee. | C , , , , | $\square 100.00$ |
|  | Name of Employer Apple Transportation | Occupation president | Receipt |
|  | Receipt For: $\quad 2010$ $\square$ Primary $\quad \mathrm{X}$ General $\square$ Other (specify) $\nabla$ | Election Cycle-to-Date |  |
| B. | Full Name (Last, First, Middle Initial) Dale R. Regnier |  | Date of Receipt |
|  | Mailing Address 981 Wittman Drive |  |  |
|  | City | State Zip Code | Transaction ID: 01015.C22787 |
|  | Fort Myers | FL 33919 | Amount of Each Receipt this Period |
|  | FEC ID number of contributing federal political committee. | C , , , , , | $2400.00$ |

Date of Receipt

| Name of Employer <br> LTP Management | Occupation partner |
| :---: | :---: |
| Receipt For: $\quad 2010$ $\square$ Primary $\quad X$ General $\square$ Other (specify) $\nabla$ | Election Cycle-to-Date $\boldsymbol{\nabla}$ |
| Full Name (Last, First, Middle Initial) Edwin Sandham |  |
| Mailing Address 1964 SW Saint Andrews Dr |  |
| City <br> Palm City | State Zip Code <br> FL $34990-2210$ |
| FEC ID number of contributing federal political committee. | C , , , , |
| Name of Employer retired | Occupation retired |
| Receipt For: $\quad 2010$ $\square$ Primary $\quad$ X General $\square$ Other (specify) $\nabla$ | Election Cycle-to-Date $\boldsymbol{\nabla}$ |

## Receipt

## Date of Receipt



Transaction ID: 01015.C22793
Amount of Each Receipt this Period
$\square, 1,250.00$

Receipt

| SUBTOTAL of Receipts This Page (optional) ........................................................ | - | 2750.00 |
| :---: | :---: | :---: |
| TOTAL This Period (last page this line number only). | - |  |

## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10/21 (check only one)


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NAME OF COMMITTEE (In Full)
§ Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A.
Full Name (Last, First, Middle Initial)

| Richard Simeone |  |  |
| :--- | :--- | :--- |
| Mailing Address | 1777 S.E. 15th Street, \#505 |  |
| City | State | Zip Code |
| Fort Lauderdale | FL | 33316 |

Date of Receipt


Transaction ID: 01015.C22789
Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.


| Name of Employer <br> Tripp, Scott |
| :--- | :--- |
| Receipt For: $\quad$ 2010 |
| $\square$Primary $\quad X$ General <br> Other (specify) $\nabla$ |


| Occupation <br> attorney |
| :--- |
| Election Cycle-to-Date $\boldsymbol{\nabla}$ |

$\square 2400.00$

Receipt
B. Full Name (Last, First, Middle Initial)
B. David Spellberg

| Mailing Address | 2485 Lantern Lane |  |  |
| :--- | :--- | :--- | :--- |
| City | State | Zip Code |  |
| Naples | FL | 34102 |  |

Date of Receipt


Transaction ID: 01015.C22797
Amount of Each Receipt this Period
$\square, 1000.00$

## Receipt

## Date of Receipt



Transaction ID: 01014.C22784
Amount of Each Receipt this Period
$\square$

Receipt

| SUBTOTAL of Receipts This Page (optional) ........................................................ | - | 3500.00 |
| :---: | :---: | :---: |
| TOTAL This Period (last page this line number only) ........................................... | - |  |

## SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 11/21 (check only one)
Use separate schedule(s) for each category of the Detailed Summary Page

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| :---: | :---: | :---: |
| $\sum \begin{aligned} & \text { NAME OF COMMITTEE (In Full) } \\ & \text { Friends of Connie Mack }\end{aligned}$ |  |  |
| Full Name (Last, First, Middle Initial) Jovan Zepcevski |  | Date of Receipt |
| Mailing Address 7802 Jean Blvd |  |  |
| City | State Zip Code | Transaction ID: 01015.C22798 |
| Fort Myers | FL 33967-6015 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C , , , , , | $1500.00$ |
| Name of Employer Zep Construction, Inc. | Occupation <br> Marine Contractor | Receipt |
| Receipt For: $\quad 2010$ $\square$ Primary $\quad X$ General $\square$ Other (specify) $\nabla$ | Election Cycle-to-Date $\boldsymbol{\nabla}$ |  |


| SUBTOTAL of Receipts This Page (optional) ........................................................ | - | 1500.00 |
| :---: | :---: | :---: |
| TOTAL This Period (last page this line number only) | - | 16150.00 |

## Image\# 10931699794

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. American Express

Mailing Address P. O. Box 360002

| City <br> Fort Lauderdale |  | State Zip Code <br> FL $33336-$ |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Purpose of Disbursement CREDIT CARD: SEE BELOW |  |  |  |  |
| Candidate Name |  |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br>  Senate <br> $\square$ President <br> District:  | Disbursement For $\square$ Primar $\square$ Other | General <br> cify) |  |

$\square 1332.05$

CREDIT CARD: SEE BELOW

Transaction ID: 01014.E5766
B. Southwest Florida International Airport

| Mailing Address 11000 Terminal Access Rd Ste 8671 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| City Fort Myers |  | State Zip Code <br> FL $33913-8213$ |  |  |
| Purpose of Disbursement parking |  |  |  |  |
| Candidate Name |  |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br> Senate  <br>  President <br> District:  | Disbursement For <br> Primar <br> Other | General cify) |  |



## [MEMO ITEM]

MEMO: PARKING

Transaction ID: 01014.E5767
Date of Disbursement


Amount of Each Disbursement this Period
$\square 217.88$
[MEMO ITEM]
MEMO: TELEPHONE SERVICE

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A.

| Full Name (Last, First, |
| :--- |
| FedEx |
| Mailing Address |


| City | $\begin{array}{l}\text { State } \\ \text { Memphis }\end{array}$ | Zip Code |  |
| :--- | :--- | :--- | :--- |
| 38101-1140 |  |  |  |$)$


| Office Sought: | House |
| :---: | :---: |
|  | Senate |
|  | President |
| State: | District: |

B. Florida Business Information, Inc.

| Mailing Address PO Box 193 |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| City Bell |  | State Zip Code <br> CA $32619-0193$ |  |  |
| Purpose of Disbursement newspaper clipping service |  |  |  |  |
| Candidate Name |  |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br>  Senate <br> $\square$ President <br> District:  | Disbursement For: |  |  |
| Full Name (Last, First, Middle Initial) Verizon Wireless |  |  |  |  |

Date of Disbursement


## [MEMO ITEM]

MEMO: NEWSPAPER CLIPPING SERVICE

Transaction ID: 01014.E5770
Date of Disbursement
$1^{M} 0^{M} \quad{ }^{\text {D }} 0 \frac{D}{\prime} \quad Y \quad 201^{Y} 0^{Y}$

Amount of Each Disbursement this Period
$\square 60.07$

## [MEMO ITEM]

MEMO: TELEPHONE SERVICE

State: District:

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

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack


## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. Lee County Tax Collector

| Mailing Address P. O. Box 1609 |  |  |  |
| :---: | :---: | :---: | :---: |
| City Fort Myers | State FL | $\begin{aligned} & \text { Zip Code } \\ & 33902- \end{aligned}$ |  |
| Purpose of Disbursement car registration fee |  |  | $\square$ |
| Candidate Name |  |  | Category/ Type |



## [MEMO ITEM]

MEMO: CAR REGISTRATION FEE

Transaction ID: 01014.E5783
Date of Disbursement
$1^{M} 0^{M} \quad$, $077^{\prime} \quad Y \quad{ }^{Y} 010^{Y}$

| Mailing Address 110 E 59th St |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| City New York |  | State Zip Code <br> NY $10022-130$ |  |  |
| Purpose of Disbursement voicemail service |  |  |  |  |
| Candidate Name |  |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br> Senate  <br> $\square$ President <br> District:  | Disbursement For: <br> $\square$ Primary $\square$ General |  |  |
| Full Name (Last, First, Middle Initial) US Airways |  |  |  |  |

Amount of Each Disbursement this Period
$\square 29.95$

## [MEMO ITEM]

MEMO: VOICEMAIL SERVICE

Transaction ID: 01014.E5784
Date of Disbursement

| Mailing Address | 7 Park Center |  |  |
| :---: | :---: | :---: | :---: |
| City Pittsburgh |  | State Zip Code <br> PA $15220-$ |  |
| Purpose of Disbursement air travel fee |  |  |  |
| Candidate Nam |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br>  Senate <br> $\square$ President <br> District:  | Disbursement For: |  |

$1^{M} 0^{M} r^{\text {D }} 077^{\prime} \quad{ }^{Y} \quad 2010^{Y}$

Amount of Each Disbursement this Period
$\square 30.00$

## [MEMO ITEM]

MEMO: AIR TRAVEL FEE


## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. Arent Fox LLP

Mailing Address 1050 Connecticut Ave NW

| City Washington |  | State Zip Code <br> DC $20036-530$ |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Purpose of Disbursement FEC Campaign Reporting |  |  |  |  |
| Candidate Name |  |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br> $\square$ Senate <br>  President <br> District:  |  | General <br> cify) |  |

B. Arent Fox LLP

| Mailing Address 1050 Connecticut Ave NW |  |  |  |
| :---: | :---: | :---: | :---: |
| City Washington |  | State Zip Code <br> DC $20036-5308$ |  |
| Purpose of Disbursement Legal |  |  |  |
| Candidate Name |  |  | $\begin{aligned} & \text { Category/ } \\ & \text { Type } \end{aligned}$ |
| Office Sought: <br> State: | $\square$ <br> House <br> Senate <br>  <br>  <br> President |  |  |

Date of Disbursement


FEC CAMPAIGN REPORTING

Transaction ID: 01014.E5760

Amount of Each Disbursement this Period
$\square 362.00$

Transaction ID: 01014.E5763
Date of Disbursement
$1^{M} 0^{M} \quad{ }^{\text {D }} 0 \frac{D}{\prime} \quad Y \quad 201^{Y} 0^{Y}$

Amount of Each Disbursement this Period
$\square 205.56$

CAMPAIGN CAR INSURANCE

State: District:

| SUBTOTAL of Disbursements This Page (optional) ....................................................... | $\downarrow$ | 4730.44 |
| :---: | :---: | :---: |
| TOTAL This Period (last page this line number only) ............................................... | $\checkmark$ |  |

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. Chase Card Services

| Mailing Addres | PO Box 15153 |  |  |
| :---: | :---: | :---: | :---: |
| City Wilmington |  | State Zip Code <br> DE $19886-5153$ |  |
| Purpose of Disbursement CREDIT CARD: SEE BELOW |  |  |  |
| Candidate Name |  |  | Category/ Type |
| Office Sought: <br> State: | $\square$ House <br>  Senate <br> $\square$ President <br> District:  |  |  |

Transaction ID: 01014.E5786
Date of Disbursement


Amount of Each Disbursement this Period
$\square 1599.54$

CREDIT CARD: SEE BELOW

Transaction ID: 01014.E5785
Date of Disbursement


## [MEMO ITEM]

MEMO: TELEPHONE SERVICE

Transaction ID: 01014.E5787
Date of Disbursement
$\left.1^{M} 0^{M}\right|^{D} 077^{\prime} \quad Y \quad 2010^{Y}$

Amount of Each Disbursement this Period
$\square 41.68$

## [MEMO ITEM]

MEMO: CAMPAIGN MEALS

State: District:


## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack


## Image\# 10931699801

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. Capitol Hill Club

| Mailing Address 300 1st St SE |  |  |
| :--- | :--- | :--- |
| City | State | Zip Code |
| Washington | DC | 20003-1801 |
| Purpose of Disbursement <br> campaign meals |  |  |
| Candidate Name |  | Category/ <br> Type |



## [MEMO ITEM]

MEMO: CAMPAIGN MEALS

Transaction ID: 01014.E5812
Date of Disbursement
$1^{M} 0^{M} \quad$ ' $077^{\prime} \quad Y \quad 2010^{Y}$

Amount of Each Disbursement this Period 174.13

## [MEMO ITEM]

MEMO: STORAGE

Transaction ID: 01014.E5764
Date of Disbursement


Amount of Each Disbursement this Period
635.71


State: District:

| SUBTOTAL of Disbursements This Page (optional) ................................................. | $\downarrow$ | 635.71 |
| :---: | :---: | :---: |
| TOTAL This Period (last page this line number only) ............................................... | - |  |

## Image\# 10931699802

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack
Full Name (Last, First, Middle Initial)
A. Jivaldi LLC

## Mailing Address 707 MOunt Errigal PI

| City Lincoln |  | State Zip Code <br> CA $95648-$ |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Purpose of Disbursement website service fee |  |  |  |  |
| Candidate Name |  |  |  | $\begin{aligned} & \text { Category/ } \\ & \text { Type } \end{aligned}$ |
| Office Sought: <br> State: | $\square$ House <br> $\square$ Senate <br> $\square$ President <br> District:  |  |  |  |

$\square 225.00$

WEBSITE SERVICE FEE

Transaction ID: 01014.E5758
Date of Disbursement


| Mailing Address 16 N Astor St |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| City Irvington |  | State NY | $\begin{aligned} & \text { Zip Code } \\ & 10533-1522 \end{aligned}$ |  |
| Purpose of Disbursement political consulting |  |  |  |  |
| Candidate Name |  |  |  | Category/ Type |
| Office Sought: State: | House <br> Senate <br> President strict: |  |  |  |

Amount of Each Disbursement this Period
$\square 2000.00$

POLITICAL CONSULTING

Transaction ID: 01014.E5757
Date of Disbursement


Amount of Each Disbursement this Period
$\square 3500.00$

POLITICAL CONSULTING

### 5725.00

TOTAL This Period (last page this line number only)

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS



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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

| A. | Full Name (Last, First, Middle Initial) Jamestown Associates |  |  |  |  | Transaction ID: 01007.E5748 Date of Disbursement |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Mailing Address | 5 Mapletown Road, \#300 |  |  |  |  |
|  | City Princeton |  | State NJ | $\begin{aligned} & \text { Zip Code } \\ & \text { 08540- } \end{aligned}$ |  | Amount of Each Disbursement this Period |
|  | Purpose of Disbursement media buy and production |  |  |  |  | $15480.00$ |
|  | Candidate Name |  |  |  | Category/ Type |  |
|  | Office Sought: <br> State: | $\square$ House <br> Senate  <br>  President <br> District:  | Disbursement Primar <br> Other | $\square$ General cify) |  | MEDIA BUY AND PRODUCTION |
| B. | Full Name (Last, First, Middle Initial) Salesforce.com |  |  |  |  | Transaction ID: 01014.E5761 Date of Disbursement |
|  | Mailing Address Online Vendor |  |  |  |  |  |
|  | City <br> San Francisco |  | State Zip Code <br> CA $94105-$ |  |  | Amount of Each Disbursement this Period |
|  | Purpose of Disbursement Database Management Service |  |  |  |  | 1490.63 |
|  | Candidate Name |  |  |  | $\begin{aligned} & \text { Category/ } \\ & \text { Type } \end{aligned}$ |  |
|  | Office Sought: <br> State: | $\square$ House <br> Senate  <br>  President <br> District:  | Disbursement F <br> Prima <br> Other | $\square$ General cify) |  | DATABASE MANAGEMENT SERVICE |



