

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Friends of Connie Mack

ADDRESS (number and street)

5100 S. Cleveland Avenue

Suite 318 PMB388

Check if different than previously reported. (ACC)

Fort Myers

FL

33907

2. **FEC IDENTIFICATION NUMBER**

C00391243

CITY

STATE

ZIP CODE

STATE DISTRICT

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

FL 14

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 11 02 2004 In the State of FL

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

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

Election on in the State of

5. Covering Period 10 01 2004 through 10 13 2004

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 Nancy H. Watkins

Signature of Treasurer Electronically Filed by Nancy H. Watkins Date 10 21 2004

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 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Connie Mack

Report Covering the Period: From: ^{M M} 1 0 ^{D D} 0 1 ^{Y Y Y Y} 2 0 0 4 To: ^{V M} 1 0 ^{D D} 1 3 ^{Y Y Y Y} 2 0 0 4

	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(a)).....	73520.00	1703150.46
(b) Total Contribution Refunds (from Line 20(d)).....	700.00	2600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	72820.00	1700550.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	40277.20	1437170.96
(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)).....	40277.20	1437170.96
8. Cash on Hand at Close of Reporting Period (from Line 27).....	263354.30	
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).....	199156.90	

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 02/2003)

Page 3

Write or Type Committee Name
Friends of Connie Mack

Report Covering the Period: From: ^{M M} 1 0 ^{D J} 0 1 ^{Y Y Y Y} 2 0 0 4 To: ^{V V} 1 0 ^{U J} 1 3 ^{Y Y Y Y} 2 0 0 4

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	34279.00	
(i) Itemized (use Schedule A).....	4741.00	
(ii) Unitemized.....		
(iii) TOTAL of contributions	39020.00	1331651.41
from individuals..... ▶		
(b) Political Party Committees.....	0.00	493.95
(c) Other Political Committees (such as PACS).....	34500.00	371005.10
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	73520.00	1703150.46
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	974.80
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	73520.00	1704125.26

DETAILED SUMMARY PAGE
of Disbursements

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Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	40277.20	1437170.96
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
<hr/>		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	700.00	2600.00
(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)).....	700.00	2600.00
<hr/>		
21. OTHER DISBURSEMENTS.....	0.00	1000.00
<hr/>		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	40977.20	1440770.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	230811.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 15, page3).....	73520.00
25. SUBTOTAL (add Line 23 and Line 24).....	304331.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40977.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	263354.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 61

(check only one)

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

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)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. AFLAC Incorporated PAC		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 1932 Wynnton Road		Transaction ID: C01M402
City Columbus	State GA	Zip Code 31808
FEC ID number of contributing federal political committee. C C00034157		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) B. American Academy of Ophthalmology PAC		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1101 Vermont Ave., N.W., #700		Transaction ID: C01Rf03
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00196248		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) C. American Bankers Assoc. PAC		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 1120 Connecticut Avenue, N.W.		Transaction ID: C012L02
City Washington	State DC	Zip Code 20038
FEC ID number of contributing federal political committee. C C00004275		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

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

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

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

FOR LINE NUMBER: PAGE 6 / 61

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Amer. Resort Development Assn. ROC-PAC		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 1201 15th Street, NW; Suite 400		Transaction ID: C01ew01
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C C00358663		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. American Sugar Cane League PAC		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address P. O. Drawer 838		Transaction ID: C01EW02
City	State	Zip Code
Thibodaux	LA	70302
FEC ID number of contributing federal political committee. C CD0081414		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. American Supply Assoc. PAC		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address 222 Merchandise Mart, #1400		Transaction ID: C01ej01
City	State	Zip Code
Chicago	IL	60654
FEC ID number of contributing federal political committee. C CD0168074		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Assoc. Builders and Contractors PAC		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 425D N. Fairfax Drive, 9th Floor		Transaction ID: C01en01
City Arlington	State VA	Zip Code 22203
FEC ID number of contributing federal political committee. C C00010421		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Bank of America Corp. PAC		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 730 15th Street, N.W.		Transaction ID: C01IZ04
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00043489		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Citigroup, Inc. PAC		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 153 E. 53rd Street		Transaction ID: C00IM04
City Citibank	State NY	Zip Code 10043
FEC ID number of contributing federal political committee. C C00008474		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Club for Growth PAC		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 1776 K Street, N.W., #300		Transaction ID: C01Ch0C
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. C C00346536		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM] earnmarks received
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 87196.00	

Full Name (Last, First, Middle Initial) B. The Coca-Cola Co. Nonpartisan Committee		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address P.O. Drawer 1734		Transaction ID: C01em01
City	State	Zip Code
Atlanta	GA	30301
FEC ID number of contributing federal political committee. C CD0012488		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Florida Citrus Mutual PAC		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address P.O. Box 89		Transaction ID: C01FB01
City	State	Zip Code
Lakeland	FL	33802
FEC ID number of contributing federal political committee. C CD0131607		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Great Lakes Sugarbeet Growers PAC		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 4800 Fashion Square Blvd., Suite 3		Transaction ID: C01f001
City Saginaw	State MI	Zip Code 48604
FEC ID number of contributing federal political committee. C C00384354		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Household International, Inc. PAC		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 2700 Sanders Road		Transaction ID: C00xJ03
City Prospect Heights	State IL	Zip Code 60070
FEC ID number of contributing federal political committee. C C00033423		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. Ind. Insurance Agents of America PAC		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 412 1st Street, S.E. , #300		Transaction ID: C01Fp02
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C C00022343		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 61

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. IPHFA PAC, Inc.		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 7820 East Rockhill, Suite 201		Transaction ID: C01ev01
City Wichita	State KS	Zip Code 67206
FEC ID number of contributing federal political committee. C C00251447		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. JM Family Enterprises, Inc. PAC		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 111 Jim Moran Blvd.		Transaction ID: C012M02
City Deerfield Beach	State FL	Zip Code 33442
FEC ID number of contributing federal political committee. C C00240B11		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Manufactured Housing Institute PAC		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 2101 Wilson Blvd., #610		Transaction ID: C01JID2
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C C00043483		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 11 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Natl. Assoc. of Ins. & Financial Advisors		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 2901 Telestar Court		Transaction ID: C01RY02
City Falls Church	State VA	Zip Code 22042
FEC ID number of contributing federal political committee. C C00005249		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. New American Leadership Fund PAC		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address P.O. Box 112		Transaction ID: C01f501
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C CD0384891		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. RJR Political Action Committee		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address P.O. Box 718		Transaction ID: C01ex01
City Winston-Salem	State NC	Zip Code 27102
FEC ID number of contributing federal political committee. C CD0042002		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. RJR Political Action Committee		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address P.O. Box 718		Transaction ID: C01ex02
City	State	Zip Code
Winston-Salem	NC	27102
FEC ID number of contributing federal political committee. C C00042002		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. SunTrust Bank PAC-Federal		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 215 S. Monroe Street, #125		Transaction ID: C00z902
City	State	Zip Code
Tallahassee	FL	32301
FEC ID number of contributing federal political committee. C CD0111587		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Wine & Spirits Wholesalers of Amer. PAC		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 805 15th Street, N.W., #430		Transaction ID: C01eW01
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C CD0147173		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	34500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Daniel F. Adams		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1921 Clifford Street, #1401		Transaction ID: C01Dm02
City Fort Myers	State FL	Zip Code 33901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer George E. Adams, Inc.	Occupation realtor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 839.40	

Full Name (Last, First, Middle Initial) B. Hall Adams		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 177 Woodley Road		Transaction ID: C010p03
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Samuel R. Adrich		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address Country Club Village, V3		Transaction ID: C00k507
City Lake Wales	State FL	Zip Code 33853
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 237.00	

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Lucy Armeris		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address P. O. Box 718		Transaction ID: C01L702
City Sanibel	State FL	Zip Code 33857
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer self-employed Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Occupation developer Election Cycle-to-Date ▼ 450.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Robert Assaf		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address 15860 Sawpit Road		Transaction ID: C007v07
City Jacksonville	State FL	Zip Code 32226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Liberty Ambulance Service Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Occupation c.e.o. Election Cycle-to-Date ▼ 475.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. A. J. Bourgeois		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address 10100 Hillview Road, #608		Transaction ID: C00WZ0B
City Pensacola	State FL	Zip Code 32514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 600.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Diane Kay Boyer		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address P. O. Box 5145		Transaction ID: C01Hb02
City Grove City	State FL	Zip Code 34224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Island Dreams North, Inc.	Occupation corp. officer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Thomas J. Brancheau		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 2735 6B Street, S.W.		Transaction ID: C01ez01
City Naples	State FL	Zip Code 34105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Pizza Hut and Taco Bell Franchises	Occupation owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mary R. Bridges		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 136 Coronado Street		Transaction ID: C00L60L
City Port Saint Joe	State FL	Zip Code 32458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 494.00	

SUBTOTAL of Receipts This Page (optional)	▶	1290.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Allen G. Braek		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 1781 S.E. 7th Street		Transaction ID: C01Pr02
City Fort Lauderdale	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Robert J. Brueck		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 25 Falconwood Court		Transaction ID: C003004
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00	

Full Name (Last, First, Middle Initial) C. Mary O. Bush		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address P. O. Box 1546		Transaction ID: C00D20N
City Hobe Sound	State FL	Zip Code 33475
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer n/a	Occupation homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Will Caldwell		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 2733 Glenbrooke Court		Transaction ID: C01Sk02
City Bloomfield Hills	State MI	Zip Code 48302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer N/A	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. John Cimrnek		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address P.O. Box 456		Transaction ID: C01FM02
City Maitacha	State FL	Zip Code 33960
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer self-employed	Occupation farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. James L. Cottrill		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address P. O. Box 767		Transaction ID: C00Mz03
City Cape Coral	State FL	Zip Code 33910
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Karen J. Dalton		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 505 S. Riverhills Drive		Transaction ID: C00td03
City	State	Zip Code
Temple Terrace	FL	33617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer N/A	Occupation homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4250.00	

Full Name (Last, First, Middle Initial) B. William S. Dalton		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 505 S. Riverhills Drive		Transaction ID: C00tc03
City	State	Zip Code
Temple Terrace	FL	33617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer H. Lee Moffitt Cancer Center	Occupation physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4250.00	

Full Name (Last, First, Middle Initial) C. Charles J. Daurey		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address P. O. Box #97		Transaction ID: C015803
City	State	Zip Code
Estero	FL	33528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer College of Life Foundation, Inc.	Occupation chairman	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00	

SUBTOTAL of Receipts This Page (optional)	4250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Lu M. Drackett		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 555 Admiralty Parade		Transaction ID: C01Ky02
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer n/a	Occupation homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Franklin J. Dugas		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 955 Andara Avenue		Transaction ID: C010F08
City Coral Gables	State FL	Zip Code 33146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) C. Mary M. Dunko		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address P. O. Box 430		Transaction ID: C000R08
City Labelle	State FL	Zip Code 33535
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 824.00	

SUBTOTAL of Receipts This Page (optional)	780.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Tully F. Dunlap		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address P. O. Box 430		Transaction ID: C000Q05
City Labelle	State FL	Zip Code 33805
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 824.00	

Full Name (Last, First, Middle Initial) B. Charles B. Edwards		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 14581 Headwater Bay Lane		Transaction ID: C00h103
City Fort Myers	State FL	Zip Code 33908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Smoot Adams Edwards	Occupation attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Vernon T. L. Eriksson		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 10100 Cypress Cove Dr., #315		Transaction ID: C004X0D
City Fort Myers	State FL	Zip Code 33908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 405.00	

SUBTOTAL of Receipts This Page (optional)	520.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
 Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Michael G. Fink		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1055 Wyomi		Transaction ID: C01KG03
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Fink & Boyle, P.A.	Occupation attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00	

Full Name (Last, First, Middle Initial) B. Richard D. Fitzgerald		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 2000 Royal Marco Way, PH I		Transaction ID: C01HH03
City Marco Island	State FL	Zip Code 34145
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 587.00	

Full Name (Last, First, Middle Initial) C. Hamilton G. Furman		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address 1524 Coral Ridge Drive		Transaction ID: C00H505
City Fort Lauderdale	State FL	Zip Code 33304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation investor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Timothy Foster		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 988N Clove Road		Transaction ID: C01dE02
City Staten Island	State NY	Zip Code 10301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self-employed	Occupation internet marketing	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Donald L. Friday		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 3924 Wilshire Court		Transaction ID: C00BY0J
City Sarasota	State FL	Zip Code 34238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 313.00	

Full Name (Last, First, Middle Initial) C. Donald L. Friday		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 3924 Wilshire Court		Transaction ID: C00BY0K
City Sarasota	State FL	Zip Code 34238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 313.00	

SUBTOTAL of Receipts This Page (optional)	▶	175.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 23 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Joseph C. Fuller		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 18 Camotwood Court		Transaction ID: C01ep01
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation attorney Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Rosemary Galbreith		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1 Beach Dr., S.E., #1B02		Transaction ID: C01el01
City St. Petersburg	State FL	Zip Code 33701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer n/a Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Sam Galloway		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address P. O. Box 70		Transaction ID: C00GX02
City Fort Myers	State FL	Zip Code 33502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Galloway Ford Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation auto dealer Election Cycle-to-Date ▼ 1859.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Sam Galloway		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address P. O. Box 70		Transaction ID: C00GX03
City Fort Myers	State FL	Zip Code 33902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1909.00
Name of Employer Galloway Ford	Occupation auto dealer	food & beverage Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1859.00	

Full Name (Last, First, Middle Initial) B. Christine Gargula		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 1904 S.E. 33rd Terrace		Transaction ID: C01Fo03
City Cape Coral	State FL	Zip Code 33904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self-employed	Occupation realtor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Danna E. Gilkey		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 27850 Riverwalk Way		Transaction ID: C01ed01
City Bonita Springs	State FL	Zip Code 34134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bonita Bay Group	Occupation president/c.e.o.	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1859.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Peter L. Girardin		Date of Receipt M / D / Y 10 / 05 / 2004
Mailing Address 893 Hickory Road		Transaction ID: C00S704
City Naples	State FL	Zip Code 34108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self-employed Receipt For: 2004 Primary X General Other (specify) ▼	Occupation accountant Election Cycle-to-Date ▼ 350.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Wandy Girardin		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 3001 Tamiami Trail, N., Ste. 100		Transaction ID: C01ey01
City Naples	State FL	Zip Code 34108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Girardin Associates Receipt For: 2004 Primary X General Other (specify) ▼	Occupation professional investigations Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Lela Hamre		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1228 Alhambra Drive		Transaction ID: C00No04
City Fort Myers	State FL	Zip Code 33501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Family Health Centers of SW Florida Receipt For: 2004 Primary X General Other (specify) ▼	Occupation health care Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 26 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Wesley Hansen		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address P.O. Box 448		Transaction ID: C01Pb03
City LaBelle	State FL	Zip Code 33875
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: 2004 Primary X General Other (specify) ▼	Occupation agriculture Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Barry G. Hastings		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 3125 Rum Row		Transaction ID: C01F701
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a Receipt For: 2004 Primary X General Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Robert D. Himschoot		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 6482 Morgan La Fee Lane		Transaction ID: C01eq01
City Fort Myers	State FL	Zip Code 33912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Crews Environmental Receipt For: 2004 Primary X General Other (specify) ▼	Occupation president/owner Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 27 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Caswell F. Holloway		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 18485 S.E. Village Circle		Transaction ID: C00aE09
City Jupiter	State FL	Zip Code 33469
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Josam Company	Occupation plumbing	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Bruce W. Hudson		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 1220 59th Street, W.		Transaction ID: C00Fi08
City Bradenton	State FL	Zip Code 34209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Bruce W. Hudson, M.D., P.-A.	Occupation physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Nancy L. Humphrey		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1857 Manlo Road		Transaction ID: C00hd02
City Fort Myers	State FL	Zip Code 33501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 28 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. L. Scott Jones		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 1288 Biltmore Drive		Transaction ID: C01YV02
City Fort Myers	State FL	Zip Code 33901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Seven Trent Services	Occupation engineer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Richard Kasten		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 1705 Clover Drive		Transaction ID: C01UD03
City Palatine	State IL	Zip Code 60067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. S. A. Keller		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address 777 Bayshore Drive, #1508		Transaction ID: C00Vj08
City Fort Lauderdale	State FL	Zip Code 33304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	390.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Harold L. Kent		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 16317 Villarreal de Avila		Transaction ID: C018q05
City Tampa	State FL	Zip Code 33613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Galcom International USA, Inc. Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation vice-president Election Cycle-to-Date ▼ 230.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Shirley L. Kern		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 104 Moorings Park Dr., #D1D8		Transaction ID: C01L802
City Naples	State FL	Zip Code 34105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer n/a Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 225.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. David M. Klein		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 1800 Tamiami Trail, #101A		Transaction ID: C010G04
City Port Charlotte	State FL	Zip Code 33548
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer David M. Klein, M.D., P.A. Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation physician Election Cycle-to-Date ▼ 1950.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	490.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Alfan W. Larson		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 562 Pine Grove Lane		Transaction ID: C01D503
City Naples	State FL	Zip Code 34103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Gary A. Lee		Date of Receipt M / D / Y 10 / 05 / 2004
Mailing Address 15136 Anchorage Way		Transaction ID: C019u05
City Fort Myers	State FL	Zip Code 33908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 437.00	

Full Name (Last, First, Middle Initial) C. George H. Liveskos		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 10100 Hillside Drive, #443B		Transaction ID: C00n100
City Pensacola	State FL	Zip Code 32514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Dennis J. Lumsden		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 8718 Winkler Road, #121		Transaction ID: C01et01
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation attorney Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Donald P. Luning		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address 150D Atlantic Blvd., #403		Transaction ID: C009s06
City Key West	State FL	Zip Code 33040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer n/a Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 4000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Eleanor H. Maloney		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address 182D Sevilla Blvd., #304		Transaction ID: C00J90U
City Atlantic Beach	State FL	Zip Code 32233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer n/a Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 477.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	2275.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 32 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Christopher Mariani		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address 310 Live Oak Lane		Transaction ID: C010Q02
City Harbor Bluffs	State FL	Zip Code 33770
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer E. A. Mariani Asphalt Com- pany Receipt For: 2004 Primary X General Other (specify) ▼	Occupation owner Election Cycle-to-Date ▼ 550.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Richard Marx		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address P.O. Box 440		Transaction ID: C01Uo02
City Wappingers Falls	State NY	Zip Code 12590
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: 2004 Primary X General Other (specify) ▼	Occupation insurance Election Cycle-to-Date ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Connie K. McCormick		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 12833 Yacht Club Circle		Transaction ID: C005c08
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a Receipt For: 2004 Primary X General Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 337.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Jan M. McDonald		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 2366 Sunrise Blvd.		Transaction ID: C01es01
City Fort Myers	State FL	Zip Code 33907
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Invest SW Title	Occupation real estate	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dannis J. McGillicuddy		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 1 Snapper Lane		Transaction ID: C002C06
City Falmouth	State MA	Zip Code 02540
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Woods Hole	Occupation scientist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) C. Mary A. McGillicuddy		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 585B Eichen Circle		Transaction ID: C00F808
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lee Memorial Health System	Occupation attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 725.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. T. Wainwright Miller		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address P. O. Box 204		Transaction ID: C00C903
City Fort Myers	State FL	Zip Code 33902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Thomas J. Moran		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address 875 5th Avenue, #2C		Transaction ID: C00fr06
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Mutual of America	Occupation insurance	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Stanley H. Myers		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 916 Ivory Coast Street		Transaction ID: C00JG0K
City Sebring	State FL	Zip Code 33872
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer self-employed	Occupation missionary	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 342.00	

SUBTOTAL of Receipts This Page (optional)	▶	2525.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Richard G. Paulhus		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 3900 Galt Ocean Drive, #408		Transaction ID: C00m003
City Fort Lauderdale	State FL	Zip Code 33308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hypover, Inc.	Occupation general contracting	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Raymond A. Pavuka		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 899 Anchor Drive		Transaction ID: C01eY01
City Sanibel	State FL	Zip Code 33957
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Mariner Properties Development, Inc.	Occupation developer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Dametrio Perez		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 904 S.W. 23rd Avenue		Transaction ID: C00XF05
City Miami	State FL	Zip Code 33135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lincoln-Martí Schools	Occupation educator	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 2250.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 61

(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Gordon B. Pierce		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 236 Morton Lane		Transaction ID: C00st0F
City Winter Springs	State FL	Zip Code 32708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Gordon B. Pierce		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 236 Morton Lane		Transaction ID: C00st0G
City Winter Springs	State FL	Zip Code 32708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Michael D. Rose		Date of Receipt M / D / Y 10 / 13 / 2004
Mailing Address 6305 Humphreys Blvd., #110		Transaction ID: C012K02
City Memphis	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Gaylord Entertainment	Occupation chairman	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

SUBTOTAL of Receipts TN's Page (optional)	▶	570.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Herbert J. Rowe		Date of Receipt M / D / Y 10 / 07 / 2004
Mailing Address 4801 Gulf Shore Blvd. N., #12		Transaction ID: C01LA02
City Naples	State FL	Zip Code 34103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Steven C. Shimp		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 822 Cypress Lake Circle		Transaction ID: C010i02
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Owen Ames Kimball Company	Occupation president	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Bill T. Smith		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 980 N. Federal Hwy., #402		Transaction ID: C00S805
City Boca Raton	State FL	Zip Code 33432
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Walter James Smith		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address P. O. Box 249		Transaction ID: C00Wf0A
City Naples	State FL	Zip Code 34106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Thomas W. Stued		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 2001 S. Atlantic Avenue		Transaction ID: C00TC03
City Daytona Beach Shor	State FL	Zip Code 32118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer self-employed	Occupation hotelier	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Barbara P. String		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 6001 Pelican Bay Blvd., #1005		Transaction ID: C01L303
City Naples	State FL	Zip Code 34108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Parker Hunter	Occupation financial advisor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 537.00	

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Donna D. Sublett		Date of Receipt M / D / Y 10 / 06 / 2004
Mailing Address 121D Vesper Drive		Transaction ID: C00uD05
City Fort Myers	State FL	Zip Code 33901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer n/a	Occupation homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1225.00	

Full Name (Last, First, Middle Initial) B. Terry Sutton		Date of Receipt M / D / Y 10 / 01 / 2004
Mailing Address 13288 Heather Ridge Loop		Transaction ID: C01Pn03
City Fort Myers	State FL	Zip Code 33912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Brooks Animal Hospital	Occupation veterinarian	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Lynne C. Taylor		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 6966 Overlook Drive		Transaction ID: C019z02
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

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

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Robert M. Taylor		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 15736 Glenisle Way		Transaction ID: C01eX01
City Fort Myers	State FL	Zip Code 33912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Marlster Hotels and Resor- ts	Occupation consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Sara E. Thompson		Date of Receipt M / D / Y 10 / 05 / 2004
Mailing Address 319 Inman Street		Transaction ID: C01lh02
City Lehigh Acres	State FL	Zip Code 33972
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. James A. Threl		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 4031 Gulf Shore Blvd., N., PH 1F		Transaction ID: C01GQ04
City Naples	State FL	Zip Code 34103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	1200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Gary V. Tripp		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1275 Kasamada Drive		Transaction ID: C01er01
City Fort Myers	State FL	Zip Code 33919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Oswald Tripp & Co.	Occupation chief operating officer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Vernon J. Troyer		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 22335 Palm Beach Blvd.		Transaction ID: C01FZ02
City Alva	State FL	Zip Code 33920
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self-employed	Occupation farmer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. August Urbaniak		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 4800 N. Federal Hwy., #209A		Transaction ID: C01DxD2
City Boca Raton	State FL	Zip Code 33431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation real estate investments	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Douglas Walker		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 83 Two Turtles Lane		Transaction ID: C01bW02
City Key West	State FL	Zip Code 33040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self-employed Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation business owner Election Cycle-to-Date ▼ 750.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. Kenneth P. Walker		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 1920 Virginia Avenue, #B03		Transaction ID: C015z04
City Fort Myers	State FL	Zip Code 33901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Edison Community College Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation president Election Cycle-to-Date ▼ 650.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) C. Lindsey Winslow		Date of Receipt M / D / Y 10 / 08 / 2004
Mailing Address 793 Birdie View Point		Transaction ID: C010I02
City Sanibel	State FL	Zip Code 33957
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Occupation retired Election Cycle-to-Date ▼ 750.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial) A. Robert H. Zaickar		Date of Receipt M / D / Y 10 / 05 / 2004
Mailing Address 3026 Gainesborough Court		Transaction ID: C01Jp02
City Naples	State FL	Zip Code 34105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer First Virginia Banks, Inc.	Occupation director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Patrick J. Zanner		Date of Receipt M / D / Y 10 / 11 / 2004
Mailing Address 153B4 Milan Lane		Transaction ID: C00wL02
City Naples	State FL	Zip Code 34110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Robert E. Zimmerman		Date of Receipt M / D / Y 10 / 04 / 2004
Mailing Address 170B Venezia Way		Transaction ID: C01XC02
City Naples	State FL	Zip Code 34105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

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)
 or each category of the
 Detailed Summary Page

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 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) Friends of Connie Mack		
Full Name (Last, First, Middle Initial) A. Mike Zack	Date of Receipt M / D / Y 10 / 07 / 2004	
Mailing Address P. O. Box 1850	Transaction ID: C00Yu08	
City State Zip Code Nashville IN 47448	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A)-1)	
Name of Employer Zook Farms, Inc.		
Receipt For: 2004 Primary X General Other (specify) ▼	Occupation farmer Election Cycle-to-Date ▼	600.00

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	34279.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P. O. Box 78522

City Phoenix State AZ Zip Code 85082

Purpose of Disbursement
telephone

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D000N0i

Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

231.64

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bank of Tampa

Mailing Address P. O. Box 1

City Tampa State FL Zip Code 33601

Purpose of Disbursement
payroll taxes

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D001n0i

Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

2726.47

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Beach Printing

Mailing Address 1088 Sunset Strip

City Fort Lauderdale State FL Zip Code 33313

Purpose of Disbursement
printing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00FR00

Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

280.86

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3240.97

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)
A. Jeffrey M. Cohen

Mailing Address 13280 Corbel Circle, #1922

City State Zip Code
Fort Myers FL 33907

Purpose of Disbursement
salary

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00sA0Y
Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

2370.08

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Jeffrey M. Cohen

Mailing Address 13280 Corbel Circle, #1922

City State Zip Code
Fort Myers FL 33907

Purpose of Disbursement
see memo entries

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00sA0Z
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

842.83

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Delta Air Lines

Mailing Address Hartfield Internatl. Airport

City State Zip Code
Atlanta GA 30320

Purpose of Disbursement
travel-5/28

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D013F0F
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

219.38

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

3212.91

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)
A. Hyatt Regency Coconut Point

Mailing Address 5001 Coconut Road

City State Zip Code
Bonita Springs FL 34134

Purpose of Disbursement
meals-8/20

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
Primary X General
Other (specify) ▼

State: District

Category/
Type

Transaction ID: D01FT04
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

73.69

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Monocle Restaurant on Capitol Hill

Mailing Address 107 D Street, N.E.

City State Zip Code
Washington DC 20002

Purpose of Disbursement
meals-8/29

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
Primary X General
Other (specify) ▼

State: District

Category/
Type

Transaction ID: D01R01
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

374.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 13280 Corbel Circle, #1B22

City State Zip Code
Fort Myers FL 33907

Purpose of Disbursement
see memo entries

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004
Primary X General
Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00sA0a
Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

1271.06

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1271.06

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Connie Mack

Full Name (Last, First, Middle Initial)
 A. Hilton Arlington & Towers

Mailing Address 950 N. Stafford Street

City Arlington State VA Zip Code 22203

Purpose of Disbursement
 lodging

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D01fn01
 Date of Disbursement

10 / 02 / 2004

Amount of Each Disbursement this Period

1100.73

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
 B. Jeffrey M. Cohen

Mailing Address 13280 Corbel Circle, #1022

City Fort Myers State FL Zip Code 33607

Purpose of Disbursement
 travel/meeting

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00jsA0b
 Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

143.44

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 C. The Donatelli Group

Mailing Address 118 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
 online fundraising

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D015x0E
 Date of Disbursement

10 / 06 / 2004

Amount of Each Disbursement this Period

88.80

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

233.04

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address P. O. Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
delivery

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00Sg0r

Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

196.89

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Arthur J. Finkelstein & Assoc.

Mailing Address 16 N. Astor

City Irvington State NY Zip Code 10533

Purpose of Disbursement
political consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00Gp0U

Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

14000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Florida Power & Light

Mailing Address General Mail Facility

City Miami State FL Zip Code 33188

Purpose of Disbursement
utilities

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00Lw00

Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

295.12

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

14492.01

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)
A. Florida Research, Inc.

Mailing Address P. O. Box 3159

City Clearwater State FL Zip Code 33767

Purpose of Disbursement
research

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: D00nZDw
Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

125.64

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Mailing Address P. O. Box 70

City Fort Myers State FL Zip Code 33602

Purpose of Disbursement
^ In-Kind->food & beverage

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: D00GX01
Date of Disbursement

10 / 07 / 2004

Amount of Each Disbursement this Period

1306.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Mailing Address 5100 S. Cleveland Ave., #318-388

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
salary

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: D00Lr1s
Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1506.58

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2941.22

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Connie Mack

Full Name (Last, First, Middle Initial)
A. Scott Henderson

Mailing Address 5100 S. Cleveland Ave., #318-388

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
 travel/supplies

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00Lr1t
 Date of Disbursement
 10 / 05 / 2004

Amount of Each Disbursement this Period
 441.38

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

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

Mailing Address 5 Mapletown Road, #300

City Princeton State NJ Zip Code 08540

Purpose of Disbursement
 media consulting

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00a512
 Date of Disbursement
 10 / 12 / 2004

Amount of Each Disbursement this Period
 1000.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Line 1 Communications

Mailing Address 3400 Birchwood Manor

City Tallahassee State FL Zip Code 32312

Purpose of Disbursement
 fax/email service

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00xb0C
 Date of Disbursement
 10 / 05 / 2004

Amount of Each Disbursement this Period
 777.78

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2219.16

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Connie Mack

Full Name (Last, First, Middle Initial)
 A. Connie H. Mack

Mailing Address 5100 S. Cleveland Ave.

City State Zip Code
 Fort Myers FL 33907

Purpose of Disbursement
 see memo entries

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D000BOS
 Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

655.30

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 B. Delta Air Lines

Mailing Address Hartfield Internat. Airport

City State Zip Code
 Atlanta GA 30320

Purpose of Disbursement
 travel-9/26

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D013FDG
 Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

440.40

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
 C. Connie H. Mack

Mailing Address 5100 S. Cleveland Ave.

City State Zip Code
 Fort Myers FL 33907

Purpose of Disbursement
 see memo entries

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D00080T
 Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

1397.24

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2052.54

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 53 / 61

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)

A. Hilton Arlington & Towers

Mailing Address 950 N. Stafford Street

City Arlington State VA Zip Code 22203

Purpose of Disbursement
lodging

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D01fn02

Date of Disbursement

10 / 02 / 2004

Amount of Each Disbursement this Period

1262.35

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Kara Moore

Mailing Address 5100 S. Cleveland Ave., #318 PMB 3

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
salary

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00xa0Z

Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

1843.33

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Kara Moore

Mailing Address 5100 S. Cleveland Ave., #318 PMB 3

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
travel/supplies

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00xa0a

Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

481.03

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2304.36

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 54 / 61

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

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NAME OF COMMITTEE (In Full)
Friends of Connie Mack

Full Name (Last, First, Middle Initial)

A. Natl. Republican Congressional Committee

Mailing Address 320 First Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement
fax services

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00bq03

Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

207.27

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Pitney Bowes

Mailing Address P. O. Box 856390

City Louisville State KY Zip Code 40285

Purpose of Disbursement
equipment rent

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D014j07

Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

505.62

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. SCM Associates, Inc.

Mailing Address 10 Main Street

City Jaffrey State NH Zip Code 03452

Purpose of Disbursement
telemarketing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D00071A

Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

2214.30

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2927.19

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Connie Mack

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

Mailing Address P. O. Box 96064

City Charlotte State NC Zip Code 28296

Purpose of Disbursement telephone
 Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: D00xdOV
 Date of Disbursement
 10 / 05 / 2004

Amount of Each Disbursement this Period
 47.33

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

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

Mailing Address P. O. Box 96064

City Charlotte State NC Zip Code 28296

Purpose of Disbursement telephone
 Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: D00xdOW
 Date of Disbursement
 10 / 05 / 2004

Amount of Each Disbursement this Period
 436.63

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
 Sharon S. Thierer

Mailing Address 512 S.E. 5th Avenue

City Cape Coral State FL Zip Code 33990

Purpose of Disbursement salary
 Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2004 Primary X General Other (specify) ▼

Category/ Type

Transaction ID: D00h40S
 Date of Disbursement
 10 / 01 / 2004

Amount of Each Disbursement this Period
 1240.04

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ **1724.00**

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)

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

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NAME OF COMMITTEE (In Full)
 Friends of Connie Mack

Full Name (Last, First, Middle Initial)
 A. Sharon S. Thierer

Mailing Address 512 S.E. 5th Avenue

City Cape Coral State FL Zip Code 33900

Purpose of Disbursement
 office supplies

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D00h40T
 Date of Disbursement

10 / 12 / 2004

Amount of Each Disbursement this Period

48.74

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
 B. U.S. Postmaster

Mailing Address Main Post Office

City Fort Myers State FL Zip Code 33607

Purpose of Disbursement
 postage

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D00NE0W
 Date of Disbursement

10 / 05 / 2004

Amount of Each Disbursement this Period

1110.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

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

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement
 accounting services

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: D00010D
 Date of Disbursement

10 / 01 / 2004

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3658.74

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

40277.20

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 57 / 61

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

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)
 Friends of Connie Mack

A. Full Name (Last, First, Middle Initial)
 Mary O. Bush

Mailing Address P. O. Box 1546

City Hobe Sound State FL Zip Code 33475

Purpose of Disbursement
 contribution refund

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00D201
 Date of Disbursement
 10 / 12 / 2004

Amount of Each Disbursement this Period
 200.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
 Karen J. Dalton

Mailing Address 505 S. Riverhills Drive

City Temple Terrace State FL Zip Code 33617

Purpose of Disbursement
 contribution refund

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00D01
 Date of Disbursement
 10 / 12 / 2004

Amount of Each Disbursement this Period
 250.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
 William S. Dalton

Mailing Address 505 S. Riverhills Drive

City Temple Terrace State FL Zip Code 33617

Purpose of Disbursement
 contribution refund

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: D00D01
 Date of Disbursement
 10 / 12 / 2004

Amount of Each Disbursement this Period
 250.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	700.00
TOTAL This Period (last page this line number only)	700.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

(Use separate schedule(s) for each numbered line)	PAGE 58 / 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Line 1 Communications		Nature of Debt (Purpose): fax/email services	
Mailing Address 3400 Birchwood Manor			
City Tallahassee	State FL	ZIP Code 32312	
Outstanding Balance Beginning This Period 777.78		Transaction ID: 3	
Amount Incurred This Period 0.00	Payment This Period 777.78	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Arthur J. Finkelstein & Associates		Nature of Debt (Purpose): surveys-primary debt	
Mailing Address 16 N. Astor			
City Irvington	State NY	ZIP Code 10533	
Outstanding Balance Beginning This Period 32000.00		Transaction ID: 8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robert Watkins & Company		Nature of Debt (Purpose): accounting services-primary debt	
Mailing Address 610 S. Boulevard			
City Tampa	State FL	ZIP Code 33608	
Outstanding Balance Beginning This Period 22845.11		Transaction ID: 18	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22845.11	

1) SUBTOTALS This Period This Page (optional)	▶	54845.11
2) TOTALS This Period (last page this line number only)	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

(Use separate schedule(s) for each numbered line)	PAGE 59 / 81
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jamestown Associates, LLC		Nature of Debt (Purpose): media consulting/producti- on-primary debt	
Mailing Address 5 Mapleton Road, #300			
City	State	ZIP Code	
Princeton	NJ	08540	
Outstanding Balance Beginning This Period		Transaction ID: 17	
64919.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	64919.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keelen Communications		Nature of Debt (Purpose): PAC fundraising expenses	
Mailing Address P. O. Box 2776			
City	State	ZIP Code	
Alexandria	VA	22202	
Outstanding Balance Beginning This Period		Transaction ID: 18	
860.89			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
82.35	0.00	943.24	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keelen Communications		Nature of Debt (Purpose): PAC fundraising-primary debt	
Mailing Address P. O. Box 2776			
City	State	ZIP Code	
Alexandria	VA	22202	
Outstanding Balance Beginning This Period		Transaction ID: 19	
7847.50			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	7847.50	

1) SUBTOTALS This Period THs Page (optional)	▶	73709.74
2) TOTALS This Period (last page this line number only)	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

(Use separate schedule(s) for each numbered line)	PAGE 60 / 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	
<input checked="" type="checkbox"/> 10	

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeff Cohen		Nature of Debt (Purpose): win bonus-primary debt	
Mailing Address 13280 Corbel Circle, #192			
City Ft. Myers	State FL	ZIP Code 33904	
Outstanding Balance Beginning This Period 20000.00		Transaction ID: 20	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kara Moore		Nature of Debt (Purpose): win-bonus-primary debt	
Mailing Address 5100 S. Cleveland Suite 318 PMB 388			
City Ft. Myers	State FL	ZIP Code 33907	
Outstanding Balance Beginning This Period 20000.00		Transaction ID: 21	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates, Inc.		Nature of Debt (Purpose): direct mail services-primary debt	
Mailing Address P. O. Box 720			
City Jeffrey	State NH	ZIP Code 03462	
Outstanding Balance Beginning This Period 9347.58		Transaction ID: 22	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9347.58	

1) SUBTOTALS This Period This Page (optional)	▶	49347.58
2) TOTALS This Period (last page this line number only)	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Connie Mack

(Use separate schedule(s) for each numbered line)	PAGE 61 / 81
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Arthur J. Finkelstein & Associates		Nature of Debt (Purpose): political consulting-primary debt	
Mailing Address 18 N. Astor			
City Irvington	State NY	ZIP Code 10533	
Outstanding Balance Beginning This Period 15000.00		Transaction ID: 23	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SCM Associates, Inc.		Nature of Debt (Purpose): direct mail services	
Mailing Address P. O. Box 720			
City Jaffrey	State NH	ZIP Code 03452	
Outstanding Balance Beginning This Period 2214.30		Transaction ID: 24	
Amount Incurred This Period 6254.49	Payment This Period 2214.30	Outstanding Balance at Close of This Period 6254.49	

1) SUBTOTALS This Period This Page (optional)	▶	21254.49
2) TOTALS This Period (last page this line number only)	▶	199156.90
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	