

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

PAUL ELLIOTT FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 274204

Check if different than previously reported. (ACC)

TAMPA

FL

33688

2. **FEC IDENTIFICATION NUMBER** ▼

C C00523266

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

FL

12

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 RONALD M RICARDO

Signature of Treasurer RONALD M RICARDO

[Electronically Filed]

Date

/ /

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								
-----------------	--	--	--	--	--	--	--	--

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
PAUL ELLIOTT FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	15225.00	17725.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15225.00	17725.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21985.91	29125.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	150.70	150.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	21835.21	28975.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	249.89	
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).....	11500.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

PAUL ELLIOTT FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15225.00	17725.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	15225.00	17725.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15225.00	17725.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1500.00	11500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1500.00	11500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	150.70	150.70
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	16875.70	29375.70

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21985.91	29125.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	21985.91	29125.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5360.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16875.70
25. SUBTOTAL (add Line 23 and Line 24).....	22235.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21985.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	249.89

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

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

FOR LINE NUMBER: PAGE 5 OF 30
(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)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DENNIS S. AGLIANO MD

Mailing Address P.O. BOX 18621

City State Zip Code
TAMPA FL 33679

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

Name of Employer Occupation
TAMPA BAY ENT MD

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 18 2012

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
ALFRED S. ALESSI

Mailing Address 4230 W. CULBREATH AVE

City State Zip Code
TAMPA FL 33609

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

Name of Employer Occupation
VIGO IMPORTING FOOD IMPORT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 26 2012

Transaction ID : SA11AI.4148

Amount of Each Receipt this Period
500.00

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

Mailing Address 11105 WINTHROP WAY

City State Zip Code
TAMPA FL 33612

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

Name of Employer Occupation
VIGO IMPORTING FOOD IMPORT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 31 2012

Transaction ID : SA11AI.4152

Amount of Each Receipt this Period
500.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LARRY BENNETT

Mailing Address P.O. BOX 271262

City Tampa State FL Zip Code 33688

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

Name of Employer SELF EMPLOYED Occupation RANCHER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2012

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period
 100.00

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

Mailing Address 4711 N. MANHATTAN AVE

City Tampa State FL Zip Code 33614

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

Name of Employer CARS & CONCEPTS Occupation AUTO REPAIR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2012

Transaction ID : SA11AI.4146

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
FRANK M. BUSCEMI

Mailing Address 15604 ALMONDWOOD DR.

City Tampa State FL Zip Code 33613

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

Name of Employer SELF EMPLOYED Occupation INSURANCE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period
 100.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAMUEL S. CARANANTE

Mailing Address 906 HARBOUR BAY DR.

City TAMPA State FL Zip Code 33602

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

Name of Employer DR. S. CARANANTE P.A. Occupation DENTIST

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2012

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CHARLES E CERNUDA MD

Mailing Address 802 S. BAYSIDE DRIVE

City TAMPA State FL Zip Code 33609

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2012

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period
100.00

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

Mailing Address 4212 MEADOW HILL DR

City TAMPA State FL Zip Code 33618

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

Name of Employer SELF EMPLOYED Occupation INSURANCE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012

Transaction ID : SA11AI.4156

Amount of Each Receipt this Period
250.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAM CICCARELLO

Mailing Address 43 SPANISH MAIN ST

City Tampa State FL Zip Code 33609

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

Name of Employer VIGO IMPORTING Occupation FOOD IMPORT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2012

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM S. COFFMAN JR.

Mailing Address 15436 N. FLORIDA AVE.

City Tampa State FL Zip Code 33613

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2012

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
100.00

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

Mailing Address 11968 N FLORIDA AVE.

City Tampa State FL Zip Code 33612

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2012

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period
200.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DIANA EKONOMOU

Mailing Address 907 OAK HOLLOW PLACE

City State Zip Code
BRANDON FL 33510

FEC ID number of contributing federal political committee.

Name of Employer Occupation
N/A HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
VILMA D. FERNANDEZ

Mailing Address 5620 GLENCREST BLVD

City State Zip Code
TAMPA FL 33625

FEC ID number of contributing federal political committee.

Name of Employer Occupation
N/A HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4215

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ALBERT A. FOX JR.

Mailing Address 8675 HIDDEN RIVER PARKWAY

City State Zip Code
TAMPA FL 33637

FEC ID number of contributing federal political committee.

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 10 OF 30
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAWRENCE E. FUENTES

Mailing Address 2202 MAGDALENE COVE PALACE

City Tampa State FL Zip Code 33613

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RICHARD M HABER

Mailing Address 4422 W SAN CARLOS ST.

City Tampa State FL Zip Code 33629

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

Name of Employer CRAMER & HABER Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2012

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period
50.00

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

Mailing Address 3303 LATANIA DR.

City Tampa State FL Zip Code 33618

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2012

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
100.00

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

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

400.00

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

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

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
C. T. HARKNESS

Mailing Address 2544 LAKE ELLEN CIR

City TAMPA	State FL	Zip Code 33618
---------------	-------------	-------------------

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

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2012

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
STEPHANIE A. HEBLON

Mailing Address 8310 VALLEJO PL

City TAMPA	State FL	Zip Code 33614
---------------	-------------	-------------------

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

Name of Employer JABIL CIRCUIT	Occupation IT
-----------------------------------	------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2012

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOSEPH R. KALISH

Mailing Address 1435 HOUNDS HOLLOW CT.

City LUTZ	State FL	Zip Code 33549
--------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.4201

Amount of Each Receipt this Period
100.00

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

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

450.00

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

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

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM G. KRANICH

Mailing Address 10576 WINDSOR LAKE CT.

City TAMPA State FL Zip Code 33626

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

Name of Employer SELF EMPLOYED Occupation RESTAURANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 04 / 2012

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period
200.00

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

Mailing Address 608 COLEBROOK COURT

City LUTZ State FL Zip Code 33548

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2012

Transaction ID : SA11AI.4203

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JACK M. LARKIN

Mailing Address 330 W. BEARSS AVE.

City TAMPA State FL Zip Code 33613

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

Name of Employer SPICOLA & LARKIN Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2012

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
100.00

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

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

550.00

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

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

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHARON A. LAW

Mailing Address 3739 PERDEW DR.

City State Zip Code
LAND O LAKES FL 34638

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2012

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
PAUL M. LIEN

Mailing Address 11507 N ROME AVE.

City State Zip Code
TAMPA FL 33612

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2012

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
JOSEPH K. LOPEZ SR.

Mailing Address 501 E KENNEDY BLVD.

City State Zip Code
TAMPA FL 33602

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

Name of Employer Occupation
BANKER/LOPEZ ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2012

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period
500.00

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

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

575.00

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

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

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOLLY MALOUF

Mailing Address 3115 MOSSVALE LANE

City TAMPA State FL Zip Code 33618-4318

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2012

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
THOMAS H MALOUF

Mailing Address 3115 MOSSVALE LANE

City TAMPA State FL Zip Code 33618

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

Name of Employer SELF Occupation INVESTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2012

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 14925 DEVONSHIREWOODS PL

City TAMPA State FL Zip Code 33624

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

Name of Employer BEEF O BRADYS Occupation RESTAURANT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2012

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period
 250.00

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

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

3750.00

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

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

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD J. MCINTYRE

Mailing Address 6943 EAST FOWLER AVE

City Tampa State FL Zip Code 33677

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2012

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
ROSA LEE D NICHOLS

Mailing Address 10614 N CARROLLBROOK LANE

City Tampa State FL Zip Code 33618

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2012

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
2500.00

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

Mailing Address 19802 DEER HOLLOW LN

City Lutz State FL Zip Code 33548

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

Name of Employer SELF EMPLOYED Occupation OFFICE MAINTENANCE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2012

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period
250.00

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ERIC PAGAN		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2012	
Mailing Address 17447 STINCHAR DR		Transaction ID : SA11AI.4154	
City LAND O'LAKES	State FL	Zip Code 34638	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer OFFICE DEPOT	Occupation REMODELS STORES		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) B. EUGENE D PEREZ		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2012	
Mailing Address 13801 GLEN MANOR CT		Transaction ID : SA11AI.4131	
City TAMPA	State FL	Zip Code 33613	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer GENES AUTO BODY	Occupation AUTO REPAIR		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. NILDA J PLASENCIA		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2012	
Mailing Address 2804 WHITTINGTON		Transaction ID : SA11AI.4137	
City TAMPA	State FL	Zip Code 33618	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer N/A	Occupation HOMEMAKER		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TIFFANY MALOUF RIX

Mailing Address 3115 MOSSVALE LANE

City Tampa State FL Zip Code 33618

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2012

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period
250.00

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

Mailing Address 13149 VILLAGE CHASE CIRCLE

City Tampa State FL Zip Code 33618

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

Name of Employer HILLSBOROUGH COUNTY SCHOOL Occupation TEACHER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2012

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period
50.00

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

Mailing Address 3406 W. MULLEN AVE.

City Tampa State FL Zip Code 33609

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2012

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period
250.00

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 18 OF 30
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACK SPICER

Mailing Address 17515 STINCHAR DR

City State Zip Code
LAND O LAKES FL 34638

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

Name of Employer Occupation
INDIANA PACKERS PORK SALES

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2012

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
CYNTHIA L STUART

Mailing Address 14611 LAKE MAGDALENE CIR

City State Zip Code
TAMPA FL 33613

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

Name of Employer Occupation
N/A HOMEMAKER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2012

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MICHAEL J SWENSON

Mailing Address 12008 HOPE LANE

City State Zip Code
TAMPA FL 33618

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

Name of Employer Occupation
SWENSON CONSTRUCTION CONSTRUCTION

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2012

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
500.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

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

Mailing Address 799 ARTHURS CT.

City State Zip Code
TARPON SPRINGS FL 34689

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

Name of Employer Occupation
SUNTRUST ADVISORS FINANCIAL ADVISOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 15 / 2012

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
CHRISTINE M. TRAINOR

Mailing Address 2503 HOLLIS DR.

City State Zip Code
TAMPA FL 33618

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

Name of Employer Occupation
N/A RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 19 / 2012

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
KELLY STUART WILLIAMS

Mailing Address 16205 SENTRY WOODS CT

City State Zip Code
ODESSA FL 33556

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

Name of Employer Occupation
PEGASUS LLC PUBLIC RELATIONS

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 16 / 2012

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period
200.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT WISE

Mailing Address 1903 CAPE BEND AVE

City TAMPA State FL Zip Code 33613

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2012

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period
 100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

100.00

15225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 30	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b
	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PAUL S ELLIOTT

Mailing Address **PO BOX 274204**

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

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

Name of Employer **PAUL SYDNEY ELLIOTT** Occupation **ATTORNEY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
11500.00

Date of Receipt
09 / 25 / 2012

Transaction ID : SA13A.4254

Amount of Each Receipt this Period
1500.00

LOAN

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

1500.00

1500.00

**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)		PAGE 22 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BAGMASTERS		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 1540 19TH STREET NORTH		Amount of Each Disbursement this Period 1054.36 Transaction ID : SB17.4241
City ST. PETERSBURG State FL Zip Code 33713	Purpose of Disbursement BAG SIGNS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL District: 12		

Full Name (Last, First, Middle Initial) B. BAGMASTERS		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 1540 19TH STREET NORTH		Amount of Each Disbursement this Period 1187.40 Transaction ID : SB17.4253
City ST. PETERSBURG State FL Zip Code 33713	Purpose of Disbursement BAG SIGNS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL District: 12		

Full Name (Last, First, Middle Initial) C. C.C.C.		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 11406-C NORTH DALE MABRY HWY		Amount of Each Disbursement this Period 321.00 Transaction ID : SB17.4234
City TAMPA State FL Zip Code 33618	Purpose of Disbursement CAMPAIGN CARDS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2562.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. C.C.C.		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2012
Mailing Address 11406-C NORTH DALE MABRY HWY		Amount of Each Disbursement this Period 187.25 Transaction ID : SB17.4240
City TAMPA State FL Zip Code 33618	Purpose of Disbursement 1000 FOLD CARDS Category/Type 004	
Candidate Name PAUL ELLIOTT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) B. CAKE SPC, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2012
Mailing Address 18201 STILLWELL LANE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4227
City TAMPA State FL Zip Code 33647	Purpose of Disbursement FACEBOOK SETUP Category/Type 004	
Candidate Name PAUL ELLIOTT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) C. CAKE SPC, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 18201 STILLWELL LANE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4231
City TAMPA State FL Zip Code 33647	Purpose of Disbursement FACEBOOK SETUP Category/Type 004	
Candidate Name PAUL ELLIOTT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: FL District: 12		

SUBTOTAL of Disbursements This Page (optional).....	587.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAKE SPC, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2012
Mailing Address 18201 STILLWELL LANE		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4249
City TAMPA State FL Zip Code 33647	Purpose of Disbursement FACEBOOK SERVICES 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) B. CLEARCHANNEL OUTDOOR		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 5555 ULMERTON RD.		Amount of Each Disbursement this Period 9920.00 Transaction ID : SB17.4225
City CLEARWATER State FL Zip Code 33760	Purpose of Disbursement BILLBOARDS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) C. CLEARCHANNEL OUTDOOR		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 5555 ULMERTON RD.		Amount of Each Disbursement this Period 1860.00 Transaction ID : SB17.4230
City CLEARWATER State FL Zip Code 33760	Purpose of Disbursement GILLBOARDS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

SUBTOTAL of Disbursements This Page (optional).....	11980.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLEARCHANNEL OUTDOOR		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 5555 ULMERTON RD.		Amount of Each Disbursement this Period 1240.00 Transaction ID : SB17.4244
City CLEARWATER State FL Zip Code 33760	Purpose of Disbursement BILLBOARDS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) B. SIGNS NOW		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 11602 N. DALE MABRY		Amount of Each Disbursement this Period 192.59 Transaction ID : SB17.4232
City TAMPA State FL Zip Code 33618	Purpose of Disbursement SIGNS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) C. SIGNS NOW		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 11602 N. DALE MABRY		Amount of Each Disbursement this Period 394.78 Transaction ID : SB17.4238
City TAMPA State FL Zip Code 33618	Purpose of Disbursement SIGNS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

SUBTOTAL of Disbursements This Page (optional).....	1827.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 30		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SIGNSYSTEMS		Date of Disbursement MM / DD / YYYY 09 / 04 / 2012
Mailing Address 5031 GRACE ST.		Amount of Each Disbursement this Period 481.50 Transaction ID : SB17.4246
City TAMPA State FL Zip Code 33607	Purpose of Disbursement MAGNETIC SIGNS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) B. SIGNSYSTEMS		Date of Disbursement MM / DD / YYYY 09 / 14 / 2012
Mailing Address 5031 GRACE ST.		Amount of Each Disbursement this Period 1185.03 Transaction ID : SB17.4248
City TAMPA State FL Zip Code 33607	Purpose of Disbursement SIGNS 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) C. SKRUB CREATIVE SERVICES, LLC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2012
Mailing Address 1206 N. PINE LAKE DR.		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.4223
City TAMPA State FL Zip Code 33612	Purpose of Disbursement WEB SITE SETUP 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

SUBTOTAL of Disbursements This Page (optional).....	2041.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SKRUB CREATIVE SERVICES, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address 1206 N. PINE LAKE DR.		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.4229
City TAMPA State FL Zip Code 33612	Purpose of Disbursement WEB SITE SETUP 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) B. SKRUB CREATIVE SERVICES, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2012
Mailing Address 1206 N. PINE LAKE DR.		Amount of Each Disbursement this Period 187.50 Transaction ID : SB17.4239
City TAMPA State FL Zip Code 33612	Purpose of Disbursement WEB PAGE SERVICES 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

Full Name (Last, First, Middle Initial) C. TAMPA BAY TIMES		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address P.O. BOX 112		Amount of Each Disbursement this Period 168.90 Transaction ID : SB17.4236
City ST. PETERSBURG State FL Zip Code 33731	Purpose of Disbursement AD 004 Category/Type	
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 12		

SUBTOTAL of Disbursements This Page (optional).....	731.40
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 28 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
PAUL ELLIOTT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WIREPRODUCTS INC.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2012
Mailing Address 4300 NW 10 AVE.		Amount of Each Disbursement this Period 2115.60 Transaction ID : SB17.4250
City FORT LAUDERDALE	State FL	
Zip Code 33309	Purpose of Disbursement SIGN FRAMES	Category/ Type 004
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 12	

Full Name (Last, First, Middle Initial) B. WIREPRODUCTS INC.		Date of Disbursement MM / DD / YYYY 09 / 19 / 2012
Mailing Address 4300 NW 10 AVE.		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.4252
City FORT LAUDERDALE	State FL	
Zip Code 33309	Purpose of Disbursement FRAMES FOR SIGNS	Category/ Type 004
Candidate Name PAUL ELLIOTT FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 12	

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

SUBTOTAL of Disbursements This Page (optional).....	2255.60
TOTAL This Period (last page this line number only).....	21985.91

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **PAUL ELLIOTT FOR CONGRESS** Transaction ID : **SC/10.4121**

LOAN SOURCE Full Name (Last, First, Middle Initial) PAUL S ELLIOTT	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 274204		

City	State	ZIP Code
TAMPA	FL	33688

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 06 / 2012	12/31/12	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **PAUL ELLIOTT FOR CONGRESS** Transaction ID : **SC/10.4254**

LOAN SOURCE Full Name (Last, First, Middle Initial) PAUL S ELLIOTT	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 274204		

City	State	ZIP Code
TAMPA	FL	33688

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 / 25 / 2012	12/31/12	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	1500.00
TOTALS This Period (last page in this line only).....	▶	11500.00

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