12/20/2005 22 : 25

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than 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

Democratic Executive Committee of Florida

ADDRESS (number and street) ▼ 214 South Bronough Street

Check if different than previous reported. (ACC)

Tallahassee | FL | 32302

2. **FEC IDENTIFICATION NUMBER** ▼ C00005561

CITY ▲ STATE ▲ ZIPCODE ▲

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day **PRE**-Election Report for the: Primary (12P) — General (12G) — Runoff (12R) — Convention (12C) — Special (12G)

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the: General (30G) — Runoff (30R) — Special (30S)

Election on _____ in the State of _____

5. Covering Period 11 01 2005 through 11 30 2005

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: Rudy Parker

Signature of Treasurer: Electronically Filed by Rudy Parker — Date 12 20 2005

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Democratic Executive Committee of Florida

Report Covering the Period: From: 11 01 2005 To: 11 30 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		114977.37
(b) Cash on Hand at Begining of Reporting Period	24492.87	
(c) Total Receipts (from Line 19)	30127.96	563234.84
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	54620.83	678212.21
7. Total Disbursements (from Line 31)	26744.16	650335.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27876.67	27876.67
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)	262803.77	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Democratic Executive Committee of Florida

Report Covering the Period: From: 11 01 2005 To: 11 30 2005

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	30000.00	97711.67
(ii) Unitemized	0.00	4980.78
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	30000.00	102692.45
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	53500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ▶	30000.00	156192.45
12. Transfers From Affiliated/Other Party Committees	0.00	289723.74
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	72.60	29961.90
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	55.36	397.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	86959.34
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	86959.34
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30127.96	563234.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30127.96	476275.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	5600.18	99951.67
(ii) Non-Federal Share	21133.98	287505.28
(b) Other Federal Operating Expenditures	10.00	55288.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	26744.16	442745.19
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	16716.66
(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 28(a), (b), and (c)) ▶	0.00	16716.66
29. Other Disbursements	0.00	223017.80
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	-32144.11
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	-32144.11
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	26744.16	650335.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	5610.18	362830.26

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	30000.00	156192.45
34. Total Contribution Refunds (from Line 28(d))	0.00	16716.66
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30000.00	139475.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5610.18	155239.91
37. Offsets to Operating Expenditures (from Line 15, page 3)	72.60	29961.90
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5537.58	125278.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 44
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A.
Full Name (Last, First, Middle Initial)
Democratic National Committee
Mailing Address 430 South Capitol Street SE
City: Washington State: DC Zip Code: 20003
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation: Political Committee
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 11 04 2005
Transaction ID: 11ai-000062129
Amount of Each Receipt this Period: 10000.00

B.
Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Committee
Mailing Address 120 Maryland Avenue, NE
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation: Political Committee
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 50000.00
Date of Receipt: 11 30 2005
Transaction ID: 11ai-000062738
Amount of Each Receipt this Period: 10000.00

C.
Full Name (Last, First, Middle Initial)
William L. Helmes
Mailing Address 120 Fifth Avenue 11th Floor
City: New York State: NY Zip Code: 10011
FEC ID number of contributing federal political committee. C
Name of Employer: Bromley Corp
Occupation: Real Estate Developer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 11 10 2005
Transaction ID: 11ai-000062627
Amount of Each Receipt this Period: 10000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 30000.00

TOTAL This Period (last page this line number only) ..... ▶ 30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 44
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Allstate Insurance Company

Mailing Address P. O. Box 3578

City: Akron
State: OH
Zip Code: 44309-3578

FEC ID number of contributing federal political committee: C

Name of Employer:

Occupation: Insurance

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 5740.60

Date of Receipt: 11 02 2005

Transaction ID: 15-20-00133-00901

Amount of Each Receipt this Period: 72.60

Refund

SUBTOTAL of Receipts This Page (optional) ..... ▶ 72.60

TOTAL This Period (last page this line number only) ..... ▶ 72.60

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

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

Nature of Debt (Purpose):
Security

Mailing Address P. O. BOX 9001076

City: Louisville State: KY ZIP Code: 40290-1076

Outstanding Balance Beginning This Period: 60.19

Transaction ID: 10-000064

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	60.19

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

Nature of Debt (Purpose):
Security

Mailing Address P. O. BOX 9001076

City: Louisville State: KY ZIP Code: 40290-1076

Outstanding Balance Beginning This Period: 60.19

Transaction ID: 10-000106

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	60.19

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

Nature of Debt (Purpose):
Security Services

Mailing Address P. O. BOX 9001076

City: Louisville State: KY ZIP Code: 40290-1076

Outstanding Balance Beginning This Period: 60.19

Transaction ID: 10-000112

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	60.19

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**180.57**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

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

Nature of Debt (Purpose):
Security

Mailing Address P. O. BOX 9001076

City: Louisville State: KY ZIP Code: 40290-1076

Outstanding Balance Beginning This Period: 60.19

Transaction ID: 10-000150

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	60.19

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

Nature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 7492

City: Fort Lauderdale State: FL ZIP Code: 33387

Outstanding Balance Beginning This Period: 500.00

Transaction ID: 10-000077

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Allied Protection Services, Inc.

Nature of Debt (Purpose):
Security Services

Mailing Address PO Box 7259

City: Ft. Myers State: FL ZIP Code: 33911

Outstanding Balance Beginning This Period: 706.20

Transaction ID: 10-000133

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	706.20

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	1266.39
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
American Audio Visual

Nature of Debt (Purpose):
Audio Visual Services

Mailing Address 9464 American Eagle Way

City: Orlando State: FL ZIP Code: 32837

Outstanding Balance Beginning This Period: 8643.00

Transaction ID: 10-000048

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	8643.00

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

Nature of Debt (Purpose):
Contribution Refund

Mailing Address P.O. Box 360002

City: Fort Lauderdale State: FL ZIP Code: 33336-0002

Outstanding Balance Beginning This Period: 12092.59

Transaction ID: 10-000134

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	12092.59

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Black Box Network Services

Nature of Debt (Purpose):
Phone Repair

Mailing Address 1010 Haley Rd.

City: Murfeesboro State: TN ZIP Code: 37129

Outstanding Balance Beginning This Period: 187.25

Transaction ID: 10-000113

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	187.25

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**20922.84**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Black Box Network Services

Nature of Debt (Purpose):
Phone Repair

Mailing Address 1010 Haley Rd.

City: Murfreesboro State: TN ZIP Code: 37129

Outstanding Balance Beginning This Period: 107.00

Transaction ID: 10-000114

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	107.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Burt Aaronson Campaign Account

Nature of Debt (Purpose):
Contribution Refund

Mailing Address 15791 Loch Maree Lane, Apt. 5203

City: Delray Beach State: FL ZIP Code: 33446-3253

Outstanding Balance Beginning This Period: 5000.00

Transaction ID: 10-000135

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5000.00

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

Nature of Debt (Purpose):
Copier

Mailing Address 3120 N. Davis Hwy - PO Box 9435

City: Pensacola State: FL ZIP Code: 32513

Outstanding Balance Beginning This Period: 408.44

Transaction ID: 10-000130

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	408.44

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**5515.44**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capital Business Center

Nature of Debt (Purpose):
Storage Rental

Mailing Address 1851 South Monroe Street

City State ZIP Code
Tallahassee FL 32301

Outstanding Balance Beginning This Period
0.00

Transaction ID: 10-000152

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
186.60	0.00	186.60

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

Nature of Debt (Purpose):
Storage Rental

Mailing Address 1851 South Monroe Street

City State ZIP Code
Tallahassee FL 32301

Outstanding Balance Beginning This Period
0.00

Transaction ID: 10-000161

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
373.20	0.00	373.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carr, Riggs, & Ingram

Nature of Debt (Purpose):
Audit

Mailing Address 1713 Mahan Drive

City State ZIP Code
Tallahassee FL 32308

Outstanding Balance Beginning This Period
5000.00

Transaction ID: 10-000005

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5000.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**5559.80**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carr, Riggs, & Ingram

Mailing Address 1713 Mahan Drive

City State ZIP Code
Tallahassee FL 32308

Nature of Debt (Purpose):
Audit

Outstanding Balance Beginning This Period
18438.97

Transaction ID: 10-000032

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	18438.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carr, Riggs, & Ingram

Mailing Address 1713 Mahan Drive

City State ZIP Code
Tallahassee FL 32308

Nature of Debt (Purpose):
Audit

Outstanding Balance Beginning This Period
5276.84

Transaction ID: 10-000050

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5276.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Crystal Springs Water Company

Mailing Address P. O. BOX 4115

City State ZIP Code
Carol Stream IL 60197-4115

Nature of Debt (Purpose):
Water Cooler

Outstanding Balance Beginning This Period
42.55

Transaction ID: 10-000094

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	42.55

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**23758.36**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

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

Nature of Debt (Purpose):
Website Hosting

Mailing Address 3411 Capital Medical Boulevard

City: Tallahassee State: FL ZIP Code: 32308

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000153

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
170.00	0.00	170.00

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

Nature of Debt (Purpose):
Signs

Mailing Address 2098 N. Monroe Street, Suite 2

City: Tallahassee State: FL ZIP Code: 32303

Outstanding Balance Beginning This Period: 203.18

Transaction ID: 10-000082

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	203.18

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

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 94515

City: Palatine State: IL ZIP Code: 60094-4515

Outstanding Balance Beginning This Period: 13.06

Transaction ID: 10-000095

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	13.06

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**386.24**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Federal Express

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 94515

City: Palatine | State: IL | ZIP Code: 60094-4515

Transaction ID: 10-000116

Outstanding Balance Beginning This Period: 31.81

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 31.81

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

Nature of Debt (Purpose):
Shipping

Mailing Address PO Box 94515

City: Palatine | State: IL | ZIP Code: 60094-4515

Transaction ID: 10-000154

Outstanding Balance Beginning This Period: 140.85

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 140.85

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Florida Business Information, Inc.

Nature of Debt (Purpose):
Newsclipping Service

Mailing Address PO Box 193

City: Bell | State: FL | ZIP Code: 32619

Transaction ID: 10-000083

Outstanding Balance Beginning This Period: 945.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 945.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	1117.66
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Florida Power & Light Company

Nature of Debt (Purpose):
Utilities

Mailing Address General Mail Facility

City: Miami State: FL ZIP Code: 33188-0001

Outstanding Balance Beginning This Period: 1610.79

Transaction ID: 10-000085

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1610.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Florida Power & Light Company

Nature of Debt (Purpose):
Utilities

Mailing Address General Mail Facility

City: Miami State: FL ZIP Code: 33188-0001

Outstanding Balance Beginning This Period: 2691.99

Transaction ID: 10-000131

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2691.99

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

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address P.O. Box 1758

City: Tallahassee State: FL ZIP Code: 32301

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000164

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2500.00	0.00	2500.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**6802.78**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ITC DeltaCom

Nature of Debt (Purpose):
Phone

Mailing Address P.O. Box 740597

City: Atlanta | State: GA | ZIP Code: 30374-0597

Outstanding Balance Beginning This Period: 1323.76

Transaction ID: 10-000105

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1323.76	0.00

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

Nature of Debt (Purpose):
Long Distance

Mailing Address P.O. Box 740597

City: Atlanta | State: GA | ZIP Code: 30374-0597

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000158

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
647.68	0.00	647.68

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

Nature of Debt (Purpose):
Copier Lease

Mailing Address P. O. BOX 105533

City: Atlanta | State: GA | ZIP Code: 30348-5533

Outstanding Balance Beginning This Period: 1623.75

Transaction ID: 10-000107

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1623.75	0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**647.68**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lanier Worldwide, Inc.

Nature of Debt (Purpose):
Copier Lease

Mailing Address P. O. BOX 105533

City: Atlanta State: GA ZIP Code: 30348-5533

Outstanding Balance Beginning This Period: 1623.75

Transaction ID: 10-000127

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1623.75

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

Nature of Debt (Purpose):
Copier Lease

Mailing Address P. O. BOX 105533

City: Atlanta State: GA ZIP Code: 30348-5533

Outstanding Balance Beginning This Period: 1623.75

Transaction ID: 10-000128

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1623.75

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

Nature of Debt (Purpose):
Copier Lease

Mailing Address P. O. BOX 105533

City: Atlanta State: GA ZIP Code: 30348-5533

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000155

Amount Incurred This Period: 1623.75

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1623.75

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**4871.25**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lee County Black Historical Society

Nature of Debt (Purpose):
Parcel Data

Mailing Address 1936 Henderson Ave

City: Ft Meyers State: FL ZIP Code: 33916

Outstanding Balance Beginning This Period: 53.50

Transaction ID: 10-000103

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	53.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lewis B. Freeman & Partners, Inc.

Nature of Debt (Purpose):
Audit

Mailing Address 350 E. Las Olas Blvd.; Suite 1000

City: Ft. Lauderdale State: FL ZIP Code: 33301

Outstanding Balance Beginning This Period: 89587.89

Transaction ID: 10-000092

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	89587.89

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City: Philadelphia State: PA ZIP Code: 19170-7090

Outstanding Balance Beginning This Period: 457.00

Transaction ID: 10-000015

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	457.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**90098.39**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
457.00

Transaction ID: 10-000039

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	457.00

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
457.00

Transaction ID: 10-000040

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	457.00

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
397.00

Transaction ID: 10-000072

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	397.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**1311.00**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
397.00

Transaction ID: 10-000073

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	397.00

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
397.00

Transaction ID: 10-000074

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	397.00

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
457.00

Transaction ID: 10-000075

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	457.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**1251.00**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

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

Nature of Debt (Purpose):
Research

Mailing Address PO Box 7247-7090

City State ZIP Code
Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period
457.00

Transaction ID: 10-000076

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	457.00

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

Nature of Debt (Purpose):
Subscription

Mailing Address 522 East Park Avenue

City State ZIP Code
Tallahassee FL 32301

Outstanding Balance Beginning This Period
2600.00

Transaction ID: 10-000057

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2600.00

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

Nature of Debt (Purpose):
Interest

Mailing Address 522 East Park Avenue

City State ZIP Code
Tallahassee FL 32301

Outstanding Balance Beginning This Period
117.00

Transaction ID: 10-000088

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	117.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**3174.00**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LobbyTools, Inc.

Nature of Debt (Purpose):
Interest

Mailing Address 522 East Park Avenue

City: Tallahassee State: FL ZIP Code: 32301

Outstanding Balance Beginning This Period: 66.00

Transaction ID: 10-000117

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	66.00

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

Nature of Debt (Purpose):
Printing

Mailing Address 1010 Virginia Drive

City: Orlando State: FL ZIP Code: 32803

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000162

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1806.24	0.00	1806.24

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

Nature of Debt (Purpose):
Printing

Mailing Address 1010 Virginia Drive

City: Orlando State: FL ZIP Code: 32803

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000163

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8273.99	0.00	8273.99

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**10146.23**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Messer, Caparello & Self

Nature of Debt (Purpose):
Legal Services

Mailing Address P.O. Box 1876

City: Tallahassee State: FL ZIP Code: 32302

Outstanding Balance Beginning This Period: 2161.55

Transaction ID: 10-000058

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2161.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Messer, Caparello & Self

Nature of Debt (Purpose):
Legal Services

Mailing Address P.O. Box 1876

City: Tallahassee State: FL ZIP Code: 32302

Outstanding Balance Beginning This Period: 912.74

Transaction ID: 10-000063

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	912.74

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

Nature of Debt (Purpose):
Conference Calls

Mailing Address 39131 Treasury Center

City: Chicago State: IL ZIP Code: 60694-9100

Outstanding Balance Beginning This Period: 577.60

Transaction ID: 10-000108

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	577.60

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**3651.89**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Luis A. Navarro

Nature of Debt (Purpose):
Travel

Mailing Address 929 Alachua Drive

City: Tallahassee State: FL ZIP Code: 32308

Outstanding Balance Beginning This Period: 1921.96

Transaction ID: 10-000118

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1921.96

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

Nature of Debt (Purpose):
Phone

Mailing Address P.O. Box 4192

City: Carol Stream State: IL ZIP Code: 60197-4192

Outstanding Balance Beginning This Period: 568.46

Transaction ID: 10-000096

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	568.46	0.00

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

Nature of Debt (Purpose):
Phone

Mailing Address P.O. Box 4192

City: Carol Stream State: IL ZIP Code: 60197-4192

Outstanding Balance Beginning This Period: 671.64

Transaction ID: 10-000119

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	671.64	0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	1921.96
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Technologies, LLC

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address 2333 Alexandria Drive

City: Lexington State: KY ZIP Code: 40504

Outstanding Balance Beginning This Period: 9000.00

Transaction ID: 10-000070

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	9000.00

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

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address 2333 Alexandria Drive

City: Lexington State: KY ZIP Code: 40504

Outstanding Balance Beginning This Period: 3000.00

Transaction ID: 10-000087

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3000.00

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

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address 2333 Alexandria Drive

City: Lexington State: KY ZIP Code: 40504

Outstanding Balance Beginning This Period: 3000.00

Transaction ID: 10-000138

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3000.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**9000.00**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Technologies, LLC

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address 2333 Alexandria Drive

City: Lexington State: KY ZIP Code: 40504

Outstanding Balance Beginning This Period: 1500.00

Transaction ID: 10-000137

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1500.00

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

Nature of Debt (Purpose):
Compliance Consulting

Mailing Address 2333 Alexandria Drive

City: Lexington State: KY ZIP Code: 40504

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000156

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3000.00	0.00	3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Sandler, Reiff & Young P.C.

Nature of Debt (Purpose):
Legal Services

Mailing Address 50 E Street, S.E.
Suite 300

City: Washington State: DC ZIP Code: 20003

Outstanding Balance Beginning This Period: 800.00

Transaction ID: 10-000102

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	800.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**5300.00**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Service Office Supply

Mailing Address P.O. Box 15038

City Tallahassee State FL ZIP Code 32317-5038

Nature of Debt (Purpose):
Office Supplies

Outstanding Balance Beginning This Period
255.74

Transaction ID: 10-000109

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	255.74

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

Mailing Address P.O. Box 15038

City Tallahassee State FL ZIP Code 32317-5038

Nature of Debt (Purpose):
Office Supplies

Outstanding Balance Beginning This Period
128.79

Transaction ID: 10-000110

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	128.79

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

Mailing Address P.O. Box 15038

City Tallahassee State FL ZIP Code 32317-5038

Nature of Debt (Purpose):
Office Supplies

Outstanding Balance Beginning This Period
364.13

Transaction ID: 10-000120

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	364.13

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**748.66**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Service Office Supply

Nature of Debt (Purpose):
Office Supplies

Mailing Address P.O. Box 15038

City: Tallahassee State: FL ZIP Code: 32317-5038

Outstanding Balance Beginning This Period: 4.83

Transaction ID: 10-000121

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	4.83

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

Nature of Debt (Purpose):
Office Supplies

Mailing Address P.O. Box 15038

City: Tallahassee State: FL ZIP Code: 32317-5038

Outstanding Balance Beginning This Period: 53.18

Transaction ID: 10-000122

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	53.18

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

Nature of Debt (Purpose):
Office Supplies

Mailing Address P.O. Box 15038

City: Tallahassee State: FL ZIP Code: 32317-5038

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000157

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1032.76	0.00	1032.76

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**1090.77**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Service Plus, Inc.

Mailing Address PO Box 4197

City State ZIP Code
Tallahassee FL 32315

Nature of Debt (Purpose):
Copier

Outstanding Balance Beginning This Period
988.98

Transaction ID: 10-000129

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	988.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Signs Now #96

Mailing Address 1494 Apalachee Parkway

City State ZIP Code
Tallahassee FL 32301

Nature of Debt (Purpose):
Signs

Outstanding Balance Beginning This Period
80.63

Transaction ID: 10-000088

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	80.63

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

Mailing Address 350 East Las Olas Boulevard
Suite 1000

City State ZIP Code
Fort Lauderdale FL 33301

Nature of Debt (Purpose):
Legal Services

Outstanding Balance Beginning This Period
3555.00

Transaction ID: 10-000104

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3555.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**4624.61**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

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

Nature of Debt (Purpose):
Phone

Mailing Address P. O. Box 96031

City: Charlotte State: NC ZIP Code: 28296-0031

Outstanding Balance Beginning This Period: 14.08

Transaction ID: 10-000097

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	14.08

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

Nature of Debt (Purpose):
Phone

Mailing Address P. O. Box 96031

City: Charlotte State: NC ZIP Code: 28296-0031

Outstanding Balance Beginning This Period: 960.39

Transaction ID: 10-000123

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	960.39

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

Nature of Debt (Purpose):
Phone

Mailing Address P. O. Box 96031

City: Charlotte State: NC ZIP Code: 28296-0031

Outstanding Balance Beginning This Period: 0.00

Transaction ID: 10-000159

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
626.29	0.00	626.29

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**1600.76**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Sprint Local Division

Nature of Debt (Purpose):
Phone

Mailing Address P.O. Box 530581

City: Atlanta State: GA ZIP Code: 30353-0581

Outstanding Balance Beginning This Period: 659.80

Transaction ID: 10-000090

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	659.80

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

Nature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 3285
702 North Franklin Street

City: Tampa State: FL ZIP Code: 33601

Outstanding Balance Beginning This Period: 105.77

Transaction ID: 10-000132

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	105.77

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

Nature of Debt (Purpose):
Advertisement

Mailing Address 218 S. Lime Avenue, Suite 301

City: Orlando State: FL ZIP Code: 32805

Outstanding Balance Beginning This Period: 111.00

Transaction ID: 10-000061

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	111.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**876.57**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
9
X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Westin Diplomat Hotel

Nature of Debt (Purpose):
Catering

Mailing Address 3555 South Ocean Drive

City: Hollywood State: FL ZIP Code: 33019

Outstanding Balance Beginning This Period: 76605.42

Transaction ID: 10-000071

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	76605.42

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

Nature of Debt (Purpose):
Printing

Mailing Address 2321 Pembroke Road

City: Hollywood State: FL ZIP Code: 33020

Outstanding Balance Beginning This Period: 700.00

Transaction ID: 10-000062

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	700.00	0.00

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

Nature of Debt (Purpose):
Shipping

Mailing Address P.O. Box 7247-0244

City: Philadelphia State: PA ZIP Code: 19170

Outstanding Balance Beginning This Period: 31.16

Transaction ID: 10-000099

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	31.16

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**76636.58**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
United Parcel Service

Nature of Debt (Purpose):
Shipping

Mailing Address P.O. Box 7247-0244

City: Philadelphia State: PA ZIP Code: 19170

Outstanding Balance Beginning This Period: 35.55

Transaction ID: 10-000100

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	35.55

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

Nature of Debt (Purpose):
Shipping

Mailing Address P.O. Box 7247-0244

City: Philadelphia State: PA ZIP Code: 19170

Outstanding Balance Beginning This Period: 5.00

Transaction ID: 10-000124

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5.00

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

Nature of Debt (Purpose):
Shipping

Mailing Address P.O. Box 7247-0244

City: Philadelphia State: PA ZIP Code: 19170

Outstanding Balance Beginning This Period: 20.01

Transaction ID: 10-000125

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	20.01

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	**60.56**
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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

FOR LINE NUMBER: (check only one)
- 9
- X 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
United Parcel Service

Nature of Debt (Purpose):
Shipping

Mailing Address P.O. Box 7247-0244

City: Philadelphia State: PA ZIP Code: 19170

Outstanding Balance Beginning This Period: 1.78

Transaction ID: 10-000126

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1.78

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

Nature of Debt (Purpose):
Canvassing

Mailing Address 442 N Drive Martin Luther King Jr

City: Daytona Beach State: FL ZIP Code: 32114

Outstanding Balance Beginning This Period: 280.00

Transaction ID: 10-000111

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	280.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶	281.78
2) **TOTALS** This Period (last page this line number only) ..... ▶	282803.77
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 H2 (FEC Form 3X)
ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

I. FUNDRISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.

II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived. where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
JJ 2005/06/01	19.00 %	81.00 %

ACTIVITY IS:
[X] Fundraising [ ] Direct Candidate Support

CHECK IF THE RATIO IS:
[ ] New [ ] Revised [X] Same as Previously Reported

Transaction ID: H2-0006

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

Mailing Address
P.O. Box 4192

City: Carol Stream | State: IL | Zip Code: 60197-4192

Purpose of Disbursement:
Cell Phone

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
289908.21

Date 11 01 2005
Transaction ID: 21a-20-00120-00287

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.38		449.08		568.46

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

Mailing Address
P.O. Box 4192

City: Carol Stream | State: IL | Zip Code: 60197-4192

Purpose of Disbursement:
Late Fee

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
289918.20

Date 11 01 2005
Transaction ID: 21a-20-00120-00288

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.10		7.89		9.99

C. Full Name (Last, First, Middle Initial)
Woodward, John R

Mailing Address
812 Elizabeth Drive

City: Tallahassee | State: FL | Zip Code: 32303

Purpose of Disbursement:
See Memo Items

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
289937.87

Date 11 01 2005
Transaction ID: 21a-20-00121-0003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.13		15.54		19.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.61		472.51		598.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

Mailing Address
1000 Lowe's Boulevard

City: Mooresville | State: NC | Zip Code: 28117

Purpose of Disbursement:
Phone Cable

Category/Type

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date 11 01 2005
Transaction ID: 21a-20-00121-00289

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.13		15.54		19.67

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

Mailing Address
P.O. Box 740597

City: Atlanta | State: GA | Zip Code: 30374-0597

Purpose of Disbursement:
Phone

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
291261.63

Date 11 02 2005
Transaction ID: 21a-20-00124-00292

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
277.99		1045.77		1323.76

C. Full Name (Last, First, Middle Initial)
Haggard, Lora M

Mailing Address
P.O. Box 1758

City: Tallahassee | State: FL | Zip Code: 32301

Purpose of Disbursement:
Compliance Consulting

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
293761.63

Date 11 10 2005
Transaction ID: 21a-20-00128-00296

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
525.00		1975.00		2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
802.99		3020.77		3823.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Osmond Johnson Janitorial Service

Mailing Address
24131 Lake Talquin Drive

City: Tallahassee | State: FL | Zip Code: 32310

Purpose of Disbursement:
Janitorial Service

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
294261.63

Date 11 14 2005
Transaction ID: 21a-20-00129-00297

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

B. Full Name (Last, First, Middle Initial)
Florida Labor Law Poster Service

Mailing Address
400 Capital Circle, SE, Suite 18 #

City: Tallahassee | State: FL | Zip Code: 32301-3839

Purpose of Disbursement:
Labor Posters

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
294323.68

Date 11 14 2005
Transaction ID: 21a-20-00130-00298

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.07		49.18		62.25

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

Mailing Address
17094 Collins Ave. #510

City: Miami | State: FL | Zip Code: 33160

Purpose of Disbursement:
See Memo Items

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
295064.68

Date 11 16 2005
Transaction ID: 21a-20-00134-0003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.57		585.23		740.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
273.64		1029.41		1303.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address
Hartsfield-Jackson Atlanta International Airport

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement:
Airfare

Category/Type

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date M M / D D / Y Y Y Y
11 16 2005
Transaction ID: 21a-20-00134-00302

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.15		11.85		15.00

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

Mailing Address
Hartsfield-Jackson Atlanta International Airport

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement:
Airfare

Category/Type

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date M M / D D / Y Y Y Y
11 16 2005
Transaction ID: 21a-20-00134-00303

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.63		280.77		355.40

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

Mailing Address
Hartsfield-Jackson Atlanta International Airport

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement:
Airfare

Category/Type

Activity or Event Identifier:
Administrative 2005/2006
[MEMO ITEM]

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
0.00

Date M M / D D / Y Y Y Y
11 16 2005
Transaction ID: 21a-20-00134-00304

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.78		292.62		370.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)
Anagram Corporation

Mailing Address
310 West Jefferson St

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:
Rent

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
300084.68

Date 11 18 2005
Transaction ID: 21a-20-00137-00307

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

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

Mailing Address
310 West Jefferson St

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:
Rent

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
301484.68

Date 11 18 2005
Transaction ID: 21a-20-00138-00308

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
298.20		1121.80		1420.00

C. Full Name (Last, First, Middle Initial)
Bendixon & Associates

Mailing Address
2800 Ponce de Leon Blvd., Ste. 111

City	State	Zip Code
Coral Gables	FL	33134

Purpose of Disbursement:
Focus Groups

Category/Type

Activity or Event Identifier:
Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
312151.34

Date 11 29 2005
Transaction ID: 21a-20-00139-00309

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2240.00		8426.66		10666.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3588.20		13498.46		17086.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

Mailing Address
PO Box 530098

City: Atlanta | State: GA | Zip Code: 30353-0098

Purpose of Disbursement: Cable

Category/Type

Activity or Event Identifier: Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
3123B1.91

Date 11 29 2005
Transaction ID: 21a-20-00140-00310

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.42		182.15		230.57

B. Full Name (Last, First, Middle Initial)
Lanier Worldwide, Inc.

Mailing Address
P. O. BOX 105533

City: Atlanta | State: GA | Zip Code: 30348-5533

Purpose of Disbursement: Copier

Category/Type

Activity or Event Identifier: Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
314005.86

Date 11 29 2005
Transaction ID: 21a-20-00141-00311

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
340.99		1282.76		1623.75

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

Mailing Address
P.O. Box 4192

City: Carol Stream | State: IL | Zip Code: 60197-4192

Purpose of Disbursement: Phone

Category/Type

Activity or Event Identifier: Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date
314677.30

Date 11 30 2005
Transaction ID: 21a-20-00142-00312

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.04		530.60		671.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
530.45		1995.51		2525.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
Democratic Executive Committee of Florida

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

Mailing Address
P.O. Box 4192

City: Carol Stream | State: IL | Zip Code: 60197-4192

Purpose of Disbursement: Phone

Category/Type

Activity or Event Identifier: Administrative 2005/2006

Type of Allocated Activity:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 315373.91

Date: 11 30 2005

Transaction ID: 21a-20-00142-00313

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.29		550.32		696.61

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

Mailing Address
2321 Pembroke Road

City: Hollywood | State: FL | Zip Code: 33020

Purpose of Disbursement: Printing

Category/Type

Activity or Event Identifier: JJ 2005/08/01

Type of Allocated Activity:
[ ] Administrative [X] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 58285.14

Date: 11 07 2005

Transaction ID: 21a-20-00126-00294

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
133.00		567.00		700.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.29		1117.32		1396.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
5600.18	21133.98	26734.16

Form/Schedule: H4 Not used for FEA purposes
Transaction ID: 21a-20-00126-00294