

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

Brian Owens for Congress, Inc.

ADDRESS (number and street) 2060 ISLA VISTA LN

Check if different than previously reported. (ACC)

NAPLES

FL

34105

2. **FEC IDENTIFICATION NUMBER** ▼

C C00509562

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

FL

14

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

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

Election on / / 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 Christopher Robert Whalen

Signature of Treasurer Christopher Robert Whalen

[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
Brian Owens for Congress, Inc.

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)).... | 171213.00 | 171213.00 |
| (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))..... | 171213.00 | 171213.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 125204.08 | 125204.08 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 125204.08 | 125204.08 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 46008.92 | |
| 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)..... | 0.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Brian Owens for Congress, Inc.

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)..... | 34310.00 | 34310.00 |
| (ii) Unitemized..... | 900.00 | 900.00 |
| (iii) TOTAL of contributions from individuals ▶ | 35210.00 | 35210.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 136003.00 | 136003.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 171213.00 | 171213.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 171213.00 | 171213.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 125204.08 | 125204.08 |
| 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) ► | 125204.08 | 125204.08 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 0.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 171213.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 171213.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 125204.08 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 46008.92 |

**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 5 OF 38 |
| | <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)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Michael & Meryl Anapol

Mailing Address 2423 Indian Pipe Way

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4201

Amount of Each Receipt this Period
 Campaign Donation 500.00

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

Mailing Address 3300 Hamlet Dr.

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2012

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
 Campaign Donation 500.00

C. Full Name (Last, First, Middle Initial)
Bruce L Berlage

Mailing Address 1035 Gelston Circle

City McLean State VA Zip Code 22102

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2012

Transaction ID : SA11AI.4410

Amount of Each Receipt this Period
 Campaign Donation 250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 6 OF 38
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Michael Botte

Mailing Address 2951 Bellflower Ln.

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4213

Amount of Each Receipt this Period
 1000.00

Campaign Donation

B. Full Name (Last, First, Middle Initial)
Brian Owens for Congress, Inc.

Mailing Address 2060 ISLA VISTA LN

City NAPLES State FL Zip Code 34105

FEC ID number of contributing federal political committee. **C** C00509562

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11AI.4359

Amount of Each Receipt this Period
 15000.00

Transfer

C. Full Name (Last, First, Middle Initial)
Brian Owens for Congress, Inc.

Mailing Address 2060 ISLA VISTA LN

City NAPLES State FL Zip Code 34105

FEC ID number of contributing federal political committee. **C** C00509562

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012

Transaction ID : SA11AI.4427

Amount of Each Receipt this Period
 10.00

Campaign Contribution

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

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

16010.00

**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 38 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Thomas A Cusick

Mailing Address 2637 Bulrush Ln.

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

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
 02 / 01 / 2012

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
500.00

Campaign Donation

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

Mailing Address 19 Casa Mar Lane

City Naples State FL Zip Code 34103

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

Name of Employer Retired Occupation Retired

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
 03 / 22 / 2012

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period
500.00

Campaign Donation

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

Mailing Address 2064 Isla Vista Lane

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

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
 03 / 22 / 2012

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period
500.00

Campaign Donation

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

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

1500.00

**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 38 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Joseph W England

Mailing Address 1105-24 Ave.

City Moline State IL Zip Code 61265

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period
 Campaign Donation 500.00

B. Full Name (Last, First, Middle Initial)
Michael D Ferry

Mailing Address 1 Hughes Center Dr. Unit 1403

City Las Vegas State NV Zip Code 89169

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period
 Campaign Contribution 2500.00

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

Mailing Address 2055 Isla Vista Lane

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2012

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
 Campaign Donation 250.00

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

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

3250.00

**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 38 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Patrick Hogan

Mailing Address 3102 Dahlia Way

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period
 250.00

Campaign Donation

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

Mailing Address 2059 Isla Vista Lane

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period
 250.00

Campaign Donation

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

Mailing Address PO Box 227

City Gibson Island State MD Zip Code 21056

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

Name of Employer Maryland Orthopedics PA Occupation Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4203

Amount of Each Receipt this Period
 500.00

Campaign Donation

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

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

1000.00

**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 10 OF 38 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Roger Lipitz

Mailing Address 2908 Indigobush Way

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

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
 03 / 02 / 2012

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period
250.00

Campaign Contribution

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

Mailing Address 2853 Capistrano Way

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

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
 03 / 22 / 2012

Transaction ID : SA11AI.4217

Amount of Each Receipt this Period
500.00

Campaign Donation

C. Full Name (Last, First, Middle Initial)
Paul & Eileen McGrath

Mailing Address 26110 Osprey Nest Ct.

City Bonita Springs State FL Zip Code 34134

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

Name of Employer Retired 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
 03 / 19 / 2012

Transaction ID : SA11AI.4397

Amount of Each Receipt this Period
2500.00

Campaign Contribution

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

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

3250.00

**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 38 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Jo Anne McIntyre

Mailing Address 12212 Drews Court

City Potomac State MD Zip Code 20814

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

Name of Employer Retired 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
 03 / 07 / 2012

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period
2500.00

Campaign Donation

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

Mailing Address 12212 Drews Court

City Potomac State MD Zip Code 20854

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

Name of Employer Retired 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
 03 / 07 / 2012

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period
2500.00

Campaign Donation

C. Full Name (Last, First, Middle Initial)
Don G Osborne

Mailing Address 2386 King Palm Way

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

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
 03 / 19 / 2012

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period
250.00

Campaign Donation

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

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

5250.00

**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 38 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Paul Pyle

Mailing Address 5945 Stoney Hill Road

City State Zip Code
New Hope PA 18938

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

Name of Employer Occupation
Retired Retired

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
 03 / 09 / 2012

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
 250.00

Campaign Donation

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

Mailing Address 2438 Indian Pipe Way

City State Zip Code
Naples FL 34105

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

Name of Employer Occupation
Retired Retired

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
 03 / 22 / 2012

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
 250.00

Campaign Contribution

C. Full Name (Last, First, Middle Initial)
Robert A Sarich

Mailing Address 12709 Broad Meadow Ln.

City State Zip Code
Clarksville MD 21029

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

Name of Employer Occupation
Georgetown Consulting, LLC Manager

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
 02 / 23 / 2012

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
 500.00

Campaign Donation

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

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

1000.00

**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 38 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Francis Schwerin

Mailing Address **PO Box 8237**

City **Naples** State **FL** Zip Code **34101**

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

Name of Employer **Cardio Imaging of Naples Inc.** Occupation **Cardiologist**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 19 / 2012

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
500.00

Campaign Contribution

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

Mailing Address **3126 Dahlia Way**

City **Naples** State **FL** Zip Code **34105**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 23 / 2012

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period
250.00

Campaign Donation

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

Mailing Address **5200 Larada Ln.**

City **Edina** State **MN** Zip Code **55436**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 21 / 2012

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period
250.00

Campaign Donation

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

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

1000.00

**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 38 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
Carolyn Weinand

Mailing Address 540 Starboard Dr.

City Naples State FL Zip Code 34103

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

Name of Employer Sotheby's International Realty Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012

Transaction ID : SA11AI.4215

Amount of Each Receipt this Period
 Campaign Donation 500.00

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

Mailing Address 1573 Marsh Wren Ln.

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2012

Transaction ID : SA11AI.4408

Amount of Each Receipt this Period
 Campaign Donation 300.00

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).....

800.00

34310.00

**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 38 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

A. Full Name (Last, First, Middle Initial)
BRIAN OWENS

Mailing Address 2060 ISLA VISTA LN

City State Zip Code
NAPLES FL 34105

FEC ID number of contributing federal political committee. **C H2FL14178**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 02 / 2012

Transaction ID : SA11D.4099

Amount of Each Receipt this Period
100000.00

Candidate Contribution

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

Mailing Address 2060 ISLA VISTA LN

City State Zip Code
NAPLES FL 34105

FEC ID number of contributing federal political committee. **C H2FL14178**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100003.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2012

Transaction ID : SA11D.4224

Amount of Each Receipt this Period
3.00

Cash Contribution

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

Mailing Address 2060 ISLA VISTA LN

City State Zip Code
NAPLES FL 34105

FEC ID number of contributing federal political committee. **C H2FL14178**

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
136003.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2012

Transaction ID : SA11D.4164

Amount of Each Receipt this Period
36000.00

Campaign Contribution

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

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

136003.00

136003.00

**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 16 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. James Allan | | Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012 |
| Mailing Address 2400 Grey Oaks Drive | | Amount of Each Disbursement this Period 1555.00 Transaction ID : SB17.4351 |
| City Naples | State FL | |
| Zip Code 34105 | Purpose of Disbursement Catering | Category/ Type 007 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2012 |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 1468.36 Transaction ID : SB17.4101 |
| City Fort Lauderdale | State FL | |
| Zip Code 33336 | Purpose of Disbursement Office Supplies | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) c. American Express | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2012 |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 31.00 Transaction ID : SB17.4105 |
| City Fort Lauderdale | State FL | |
| Zip Code 33336 | Purpose of Disbursement Office Supplies | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3054.36 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012 |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 562.81 Transaction ID : SB17.4106 |
| City Fort Lauderdale | State FL | |
| Purpose of Disbursement Office Supplies | 001 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2012 |
| Mailing Address P.O. Box 360001 | | Amount of Each Disbursement this Period 738.15 Transaction ID : SB17.4107 |
| City Fort Lauderdale | State FL | |
| Purpose of Disbursement Office Supplies | 001 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012 |
| Mailing Address 2412 Pine Ridge Rd | | Amount of Each Disbursement this Period 16.40 Transaction ID : SB17.4385 |
| City Naples | State FL | |
| Purpose of Disbursement Bank Charges | 001 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1317.36 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012 |
| Mailing Address 2412 Pine Ridge Rd | | Amount of Each Disbursement this Period 3.12 Transaction ID : SB17.4387 |
| City Naples | State FL | |
| Purpose of Disbursement Bank Charges | 001 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012 |
| Mailing Address 2412 Pine Ridge Rd. | | Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4346 |
| City Naples | State FL | |
| Purpose of Disbursement Bank Charges | 006 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Best Buy | | Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012 |
| Mailing Address 6325 Naples Blvd. | | Amount of Each Disbursement this Period 609.45 Transaction ID : SB17.4145 |
| City Naples | State FL | |
| Purpose of Disbursement Office Equipment | 006 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 812.57 |
| 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 19 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Best Buy | | Date of Disbursement MM / DD / YYYY 02 / 22 / 2012 |
| Mailing Address 6325 Naples Blvd. | | Amount of Each Disbursement this Period 42.39 Transaction ID : SB17.4148 |
| City Naples | State FL | |
| Purpose of Disbursement Office Equipment | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Best Buy | | Date of Disbursement MM / DD / YYYY 03 / 13 / 2012 |
| Mailing Address 6325 Naples Blvd. | | Amount of Each Disbursement this Period 19.06 Transaction ID : SB17.4259 |
| City Naples | State FL | |
| Purpose of Disbursement Office Equipment | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Best Buy | | Date of Disbursement MM / DD / YYYY 03 / 23 / 2012 |
| Mailing Address 6325 Naples Blvd. | | Amount of Each Disbursement this Period 134.59 Transaction ID : SB17.4231 |
| City Naples | State FL | |
| Purpose of Disbursement Office Equipment | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 196.04 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 20 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. New Bradley House | | Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012 |
| Mailing Address 280 Sunset Avenue Palm Beach, FL | | Amount of Each Disbursement this Period 238.65 Transaction ID : SB17.4130 |
| City Palm Beach | State FL | |
| Zip Code 33480 | Purpose of Disbursement Campaign Materials | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. New Bradley House | | Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012 |
| Mailing Address 280 Sunset Avenue Palm Beach, FL | | Amount of Each Disbursement this Period 209.79 Transaction ID : SB17.4131 |
| City Palm Beach | State FL | |
| Zip Code 33480 | Purpose of Disbursement Campaign Materials | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Bob Burgess | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2012 |
| Mailing Address 127 Palermo Circle | | Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.4120 |
| City Fort Myers Beach | State FL | |
| Zip Code 33931 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1648.44 |
| 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 21 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Campiello's | | Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2012 |
| Mailing Address 1177 3rd St. South | | Amount of Each Disbursement this Period 155.59 Transaction ID : SB17.4244 |
| City Naples | State FL | |
| Purpose of Disbursement Fund Raising Meals | Category/ Type 001 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. CCREC | | Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012 |
| Mailing Address P O Box 7367 | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4363 |
| City Naples | State FL | |
| Purpose of Disbursement Advertising | Category/ Type 007 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Costco | | Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012 |
| Mailing Address 6275 Naples Blvd. | | Amount of Each Disbursement this Period 624.65 Transaction ID : SB17.4269 |
| City Naples | State FL | |
| Purpose of Disbursement Materials for Meet & Greet | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1780.24 |
| 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 22 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Direct Mail Systems | | Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2012 |
| Mailing Address 12450 Automobile Blvd | | Amount of Each Disbursement this Period 17446.77 Transaction ID : SB17.4365 |
| City Clearwater State FL Zip Code 33762 | Purpose of Disbursement Mail Piece 004 Category/Type | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Patrick Donohue | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 20000.00 Transaction ID : SB17.4108 |
| City New York State NY Zip Code 10023 | Purpose of Disbursement Campaign Manager 001 Category/Type | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Patrick Donohue | | Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 1433.18 Transaction ID : SB17.4114 |
| City New York State NY Zip Code 10023 | Purpose of Disbursement Campaign Manager 001 Category/Type | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 38879.95 |
| 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 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Patrick Donohue | | Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.4115 |
| City New York | State NY | |
| Zip Code 10023 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Patrick Donohue | | Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.4156 |
| City New York | State NY | |
| Zip Code 10023 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. EmbroidMe of Naples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012 |
| Mailing Address 5413 Airport Pulling Rd. North | | Amount of Each Disbursement this Period 617.72 Transaction ID : SB17.4261 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Campaign Materials | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 20617.72 |
| 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 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Patrick Hamlin | | Date of Disbursement MM / DD / YYYY 02 / 24 / 2012 |
| Mailing Address 1706 Kings Lake Blvd. #106 | | Amount of Each Disbursement this Period 573.13 Transaction ID : SB17.4155 |
| City Naples | State FL | |
| Zip Code 34112 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Jet Blue | | Date of Disbursement MM / DD / YYYY 01 / 11 / 2012 |
| Mailing Address 118-29 Queens Blvd. | | Amount of Each Disbursement this Period 144.80 Transaction ID : SB17.4126 |
| City Forrest Hills | State NY | |
| Zip Code 11375 | Purpose of Disbursement Travel | Category/ Type 002 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Jet Blue | | Date of Disbursement MM / DD / YYYY 01 / 25 / 2012 |
| Mailing Address 118-29 Queens Blvd. | | Amount of Each Disbursement this Period 289.80 Transaction ID : SB17.4127 |
| City Forrest Hills | State NY | |
| Zip Code 11375 | Purpose of Disbursement Travel | Category/ Type 002 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1007.73 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Jet Blue | | Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012 |
| Mailing Address 118-29 Queens Blvd. | | Amount of Each Disbursement this Period 289.80 Transaction ID : SB17.4128 |
| City Forrest Hills | State NY | |
| Purpose of Disbursement Travel | Category/ Type 002 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Jet Blue | | Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2012 |
| Mailing Address 118-29 Queens Blvd. | | Amount of Each Disbursement this Period 569.60 Transaction ID : SB17.4258 |
| City Forrest Hills | State NY | |
| Purpose of Disbursement Travel | Category/ Type 002 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Paul Juhasz | | Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.4118 |
| City New York | State NY | |
| Purpose of Disbursement Campaign Manager | Category/ Type 001 | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: FL | District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 10859.40 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Paul Juhasz | | Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 1330.09 Transaction ID : SB17.4122 |
| City New York | State NY | |
| Zip Code 10023 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Paddy Murphy's | | Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012 |
| Mailing Address 457 5th Avenue South | | Amount of Each Disbursement this Period 230.00 Transaction ID : SB17.4355 |
| City Naples | State FL | |
| Zip Code 34102 | Purpose of Disbursement Meet & Greet | Category/ Type 007 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Capriccio's of Naples | | Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2012 |
| Mailing Address 2344 Pine Ridge Rd. | | Amount of Each Disbursement this Period 49.02 Transaction ID : SB17.4243 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Fund Raising Meals | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1609.11 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 27 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Capriccio's of Naples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012 |
| Mailing Address 2344 Pine Ridge Rd. | | Amount of Each Disbursement this Period 32.85 Transaction ID : SB17.4265 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Fund Raising Meals | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Capriccio's of Naples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012 |
| Mailing Address 2344 Pine Ridge Rd. | | Amount of Each Disbursement this Period 30.28 Transaction ID : SB17.4275 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Fund Raising Meals | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. Capriccio's of Naples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012 |
| Mailing Address 2344 Pine Ridge Rd. | | Amount of Each Disbursement this Period 48.07 Transaction ID : SB17.4451 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Fund Raising Meals | Category/ Type 003 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 111.20 |
| 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 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Alvaro Olsen | | Date of Disbursement MM / DD / YYYY 02 / 08 / 2012 |
| Mailing Address PO Box 582 | | Amount of Each Disbursement this Period 4205.00 Transaction ID : SB17.4158 |
| City New York | State NY | |
| Zip Code 10028 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Paychex Inc. | | Date of Disbursement MM / DD / YYYY 02 / 24 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 3061.04 Transaction ID : SB17.4380 |
| City Ft. Myers | State FL | |
| Zip Code 33966 | Purpose of Disbursement Payroll Related | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. Paychex Inc. | | Date of Disbursement MM / DD / YYYY 02 / 24 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 1033.36 Transaction ID : SB17.4381 |
| City Ft. Myers | State FL | |
| Zip Code 33966 | Purpose of Disbursement Payroll Related | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 8299.40 |
| 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 29 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Paychex Inc. | | Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 3575.54 Transaction ID : SB17.4349 |
| City Ft. Myers | State FL | |
| Zip Code 33966 | Purpose of Disbursement Payroll Related | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Paychex Inc. | | Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 1938.58 Transaction ID : SB17.4384 |
| City Ft. Myers | State FL | |
| Zip Code 33966 | Purpose of Disbursement Payroll Related | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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|--|--|--|
| Full Name (Last, First, Middle Initial) c. Paychex Inc. | | Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 8.50 Transaction ID : SB17.4390 |
| City Ft. Myers | State FL | |
| Zip Code 33966 | Purpose of Disbursement Internet Fees | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 5522.62 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Paychex Inc. | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 5273.17 |
| City Ft. Myers | State FL | |
| Purpose of Disbursement Payroll Related | 001 | Transaction ID : SB17.4429 |
| Candidate Name Brian Owens for Congress, Inc. | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. Paychex Inc. | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012 |
| Mailing Address 3860 Colonial Blvd. #100 | | Amount of Each Disbursement this Period 1817.65 |
| City Ft. Myers | State FL | |
| Purpose of Disbursement Payroll Related | 001 | Transaction ID : SB17.4430 |
| Candidate Name Brian Owens for Congress, Inc. | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) c. Gregory Petloid | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012 |
| Mailing Address 101 West End Ave. #23B | | Amount of Each Disbursement this Period 3000.00 |
| City New York | State NY | |
| Purpose of Disbursement Campaign Manager | 001 | Transaction ID : SB17.4110 |
| Candidate Name Brian Owens for Congress, Inc. | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 10090.82 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Naples Print Source | | Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 789.12 Transaction ID : SB17.4133 |
| City Naples | State FL | |
| Purpose of Disbursement Office Supplies | 006 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. Naples Print Source | | Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 1010.39 Transaction ID : SB17.4138 |
| City Naples | State FL | |
| Purpose of Disbursement Office Supplies | 006 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) c. Naples Print Source | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 72.08 Transaction ID : SB17.4252 |
| City Naples | State FL | |
| Purpose of Disbursement Office Supplies | 006 | Category/ Type |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1871.59 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Naples Print Source | | Date of Disbursement MM / DD / YYYY 02 / 17 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 381.13 Transaction ID : SB17.4254 |
| City Naples | State FL | |
| Purpose of Disbursement Office Supplies | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Naples Print Source | | Date of Disbursement MM / DD / YYYY 03 / 07 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 427.97 Transaction ID : SB17.4270 |
| City Naples | State FL | |
| Purpose of Disbursement Office Supplies | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Naples Print Source | | Date of Disbursement MM / DD / YYYY 03 / 12 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 213.06 Transaction ID : SB17.4277 |
| City Naples | State FL | |
| Purpose of Disbursement Office Supplies | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1022.16 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 38 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Naples Print Source | | Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 167.27 Transaction ID : SB17.4278 |
| City Naples | State FL | |
| Zip Code 34102 | Purpose of Disbursement Office Supplies | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Naples Print Source | | Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 153.75 Transaction ID : SB17.4236 |
| City Naples | State FL | |
| Zip Code 34102 | Purpose of Disbursement Office Supplies | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Naples Print Source | | Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012 |
| Mailing Address 350 9th St. South | | Amount of Each Disbursement this Period 249.79 Transaction ID : SB17.4413 |
| City Naples | State FL | |
| Zip Code 34102 | Purpose of Disbursement Office Supplies | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 570.81 |
| 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 34 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Renda Broadcasting | | Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012 |
| Mailing Address 900 Parish St., 4th Floor | | Amount of Each Disbursement this Period 1800.00 Transaction ID : SB17.4266 |
| City Pittsburgh | State PA | |
| Zip Code 15220 | Purpose of Disbursement Campaign Advertising | Category/ Type 004 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Collier County Republican Party | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012 |
| Mailing Address 3301 Tamiami Trail | | Amount of Each Disbursement this Period 225.00 Transaction ID : SB17.4251 |
| City Naples | State FL | |
| Zip Code 34102 | Purpose of Disbursement Extracurricular Event | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. SignPro Graphics Inc | | Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012 |
| Mailing Address 2237 J&C Blvd. | | Amount of Each Disbursement this Period 629.64 Transaction ID : SB17.4260 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Campaign Materials | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 2654.64 |
| 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 35 OF 38 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Southern Campaign Resources | | Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2012 |
| Mailing Address 235 East Virginia St. | | Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4436 |
| City Tallahassee | State FL | |
| Zip Code 32301 | Purpose of Disbursement Radio Ad | Category/ Type 004 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012 |
| Mailing Address 6305 Naples Blvd. | | Amount of Each Disbursement this Period 65.88 Transaction ID : SB17.4281 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Office Supplies | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Staples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012 |
| Mailing Address 6305 Naples Blvd. | | Amount of Each Disbursement this Period 35.80 Transaction ID : SB17.4418 |
| City Naples | State FL | |
| Zip Code 34109 | Purpose of Disbursement Office Supplies | Category/ Type 006 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 601.80 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 36 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Tim Tillapaugh | | Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2012 |
| Mailing Address 1200 Goodlette Frank Road Ste10053 | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4112 |
| City Naples | State FL | |
| Zip Code 34101 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Tim Tillapaugh | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012 |
| Mailing Address 1200 Goodlette Frank Road Ste10053 | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4257 |
| City Naples | State FL | |
| Zip Code 34101 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Tim Tillapaugh | | Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012 |
| Mailing Address 1200 Goodlette Frank Road Ste10053 | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4256 |
| City Naples | State FL | |
| Zip Code 34101 | Purpose of Disbursement Campaign Manager | Category/ Type 001 |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: FL District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3000.00 |
| 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 37 OF 38 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Louis Venne | | Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2012 |
| Mailing Address 2770 Horseshoe Dr S # 6 | | Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4353 |
| City Naples | State FL | |
| Purpose of Disbursement Campaign Pictures | Category/ Type 006 | |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Christopher Robert Whalen | | Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2012 |
| Mailing Address 1075 Route 34 STE D | | Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4117 |
| City Matawan | State NJ | |
| Purpose of Disbursement Accounting | Category/ Type 001 | |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Christopher Robert Whalen | | Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012 |
| Mailing Address 1075 Route 34 STE D | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4157 |
| City Matawan | State NJ | |
| Purpose of Disbursement Accounting | Category/ Type 001 | |
| Candidate Name Brian Owens for Congress, Inc. | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL | District: 14 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3250.00 |
| 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 38 OF 38 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Brian Owens for Congress, Inc.

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Christopher Robert Whalen | | Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012 |
| Mailing Address 1075 Route 34 STE D | | Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4255 |
| City Matawan State NJ Zip Code 07747 | Purpose of Disbursement Accounting 001 Category/Type | |
| Candidate Name Brian Owens for Congress, Inc. | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: FL District: 14 | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| 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: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 2000.00 |
| TOTAL This Period (last page this line number only)..... | 120777.84 |