

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

FEC FORM 3 (Revised 02/2003)

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))....	35191.50	206404.50
(b) Total Contribution Refunds (from Line 20(d))	5844.57	5844.57
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	29346.93	200559.93
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	77034.74	202238.82
(b) Total Offsets to Operating Expenditures (from Line 14).....	1706.55	1706.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	75328.19	200532.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
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).....	8850.00	28150.00
(ii) Unitemized.....	1275.00	2175.00
(iii) TOTAL of contributions from individuals ▶	10125.00	30325.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	25066.50	176079.50
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35191.50	206404.50
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.)	1706.55	1706.55
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)..... ▶	36898.05	208111.05

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	77034.74	202238.82
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	27.66	27.66
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	5844.57	5844.57
(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)).....	5844.57	5844.57
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	82906.97	208111.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	46008.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	36898.05
25. SUBTOTAL (add Line 23 and Line 24).....	82906.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	82906.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

**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 5 OF 41
	<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)
Armand Group, The

Mailing Address 309 W. Wisconsin

City Chicago State IL Zip Code 60614

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

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
 04 / 20 / 2012

Transaction ID : SA11AI.4655

Amount of Each Receipt this Period
 500.00

Donation

B. Full Name (Last, First, Middle Initial)
Neal R. Benham

Mailing Address 3131 Stein Blvd.

City Eau Claire State WI Zip Code 54701

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

Name of Employer Occupation
 Self Pediatric Dentist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012

Transaction ID : SA11AI.4688

Amount of Each Receipt this Period
 250.00

Donation

C. Full Name (Last, First, Middle Initial)
Gregory & Suzanne Boron

Mailing Address 2040 Isla Vista Lane

City Naples State FL Zip Code 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012

Transaction ID : SA11AI.4684

Amount of Each Receipt this Period
 250.00

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 6 OF 41
	<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)
Dean Corsones

Mailing Address 15747 Villoresi Way

City Naples State FL Zip Code 34110-2715

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

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
 04 / 20 / 2012

Transaction ID : SA11AI.4651

Amount of Each Receipt this Period
 500.00

Donation

B. Full Name (Last, First, Middle Initial)
J. Scott Curvey

Mailing Address 28341 Terrazza Ln

City Naples State FL Zip Code 34110

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

Name of Employer Occupation
 Self Inventor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012

Transaction ID : SA11AI.4673

Amount of Each Receipt this Period
 250.00

Donation

C. Full Name (Last, First, Middle Initial)
P. Douglass Dollenberg

Mailing Address 11702 Fallswood Terrace

City Lutherville State MD Zip Code 21093

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

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

Transaction ID : SA11AI.4792

Amount of Each Receipt this Period
 250.00

Contribution

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 7 OF 41
	<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)
Edward & Judi Eckenhoff

Mailing Address 2537 Day Lily Place

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
 04 / 25 / 2012

Transaction ID : SA11AI.4658

Amount of Each Receipt this Period
 1000.00

Donation

B. Full Name (Last, First, Middle Initial)
Dr. Tobin Finizio

Mailing Address 1648 Chinaberry 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
 05 / 15 / 2012

Transaction ID : SA11AI.4794

Amount of Each Receipt this Period
 300.00

Contribution

C. Full Name (Last, First, Middle Initial)
Harry M. Ford, Jr.

Mailing Address 3129 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
 06 / 05 / 2012

Transaction ID : SA11AI.4680

Amount of Each Receipt this Period
 250.00

Donation

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

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

1550.00

**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 41
	<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)
R. Sheldon Johnson

Mailing Address 3133 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
 06 / 05 / 2012

Transaction ID : SA11AI.4678

Amount of Each Receipt this Period
 250.00

Donation

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

Mailing Address P.O. Box 8689

City Naples State FL Zip Code 34101

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

Name of Employer Self Occupation Investor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2012

Transaction ID : SA11AI.4796

Amount of Each Receipt this Period
 500.00

Contribution

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

Mailing Address 1645 Chinaberry 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
 05 / 23 / 2012

Transaction ID : SA11AI.4806

Amount of Each Receipt this Period
 250.00

Contribution

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 9 OF 41
	<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)
Lawrence F. Leventon

Mailing Address 310 Grant St.
Suite 814

City Pittsburgh State PA Zip Code 15219

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

Name of Employer Self Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 05 / 2012

Transaction ID : SA11AI.4670

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Richard & JoAnne Liddy

Mailing Address 4201 Gulf Shore Blvd. N
Apt. 902

City Naples State FL Zip Code 34103-2251

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
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.4644

Amount of Each Receipt this Period
300.00

Donation

C. Full Name (Last, First, Middle Initial)
James D Morgan

Mailing Address 11134 Old Carriage Rd.

City Glen Arm State MD Zip Code 21057

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
04 / 09 / 2012

Transaction ID : SA11AI.4648

Amount of Each Receipt this Period
500.00

Donation

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 10 OF 41
(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)
Dr. Francis Pflum

Mailing Address 550 Newark Avenue FL 2

City Jersey City State NJ Zip Code 07306

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

Name of Employer Self Occupation Doctor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2012

Transaction ID : SA11Al.4798

Amount of Each Receipt this Period
 1250.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Susan & Paul Siler

Mailing Address 5201 Kingston Pike Suite 6-3208

City Knoxville State TN Zip Code 37919

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
 04 / 09 / 2012

Transaction ID : SA11Al.4526

Amount of Each Receipt this Period
 500.00
 Campaign Donation

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

Mailing Address 2124 Canna 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
 05 / 15 / 2012

Transaction ID : SA11Al.4800

Amount of Each Receipt this Period
 1000.00
 Contribution

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

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

2750.00

**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 41
	<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)
James & Angela Worden

Mailing Address 325 Devil's Bight

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
 04 / 20 / 2012

Transaction ID : SA11AI.4654

Amount of Each Receipt this Period
500.00

Donation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

8850.00

**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 41
	<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
176079.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 26 2012

Transaction ID : SA11D.4856

Amount of Each Receipt this Period
25066.50

Candidate Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

25066.50

25066.50

**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 41
	<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)
Patrick Hamlin

Mailing Address 1706 Kings Lake Blvd. #106

City Naples State FL Zip Code 34112

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1533.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2012

Transaction ID : SA14.4789

Amount of Each Receipt this Period
1533.30

Refund of Payroll

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1533.30

1533.30

**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 14 OF 41			
	<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. Alice Sweetwaters Bar and Grill		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 1996 Airport Rd. South		Amount of Each Disbursement this Period 28.70
City Naples	State FL	
Purpose of Disbursement Lunch	Category/ Type 003	
Candidate Name Brian Owens for Congress, Inc.		Transaction ID : SB17.4738
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 04 / 02 / 2012
Mailing Address 2412 Pine Ridge Rd.		Amount of Each Disbursement this Period 200.00
City Naples	State FL	
Purpose of Disbursement Petty Cash	Category/ Type 002	
Candidate Name Brian Owens for Congress, Inc.		Transaction ID : SB17.4552
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 04 / 02 / 2012
Mailing Address 2412 Pine Ridge Rd.		Amount of Each Disbursement this Period 23.66
City Naples	State FL	
Purpose of Disbursement Bank Charges	Category/ Type 001	
Candidate Name Brian Owens for Congress, Inc.		Transaction ID : SB17.4600
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).....	252.36
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 15 OF 41	
	<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 04 / 02 / 2012	
Mailing Address 2412 Pine Ridge Rd.			Amount of Each Disbursement this Period 17.18	
City Naples	State FL	Zip Code 34109	Transaction ID : SB17.4601	
Purpose of Disbursement Bank Charges		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. Bank of America			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2012	
Mailing Address 2412 Pine Ridge Rd.			Amount of Each Disbursement this Period 27.00	
City Naples	State FL	Zip Code 34109	Transaction ID : SB17.4605	
Purpose of Disbursement Bank Charges		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. Bank of America			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012	
Mailing Address 2412 Pine Ridge Rd.			Amount of Each Disbursement this Period 3.00	
City Naples	State FL	Zip Code 34109	Transaction ID : SB17.4610	
Purpose of Disbursement Bank Charges		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).....	47.18
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 16 OF 41			
	<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 05 / 02 / 2012
Mailing Address 2412 Pine Ridge Rd.		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.4695
City Naples	State FL	
Purpose of Disbursement Bank Charges	001	Candidate Name Brian Owens for Congress, Inc. Category/Type
Candidate Name Brian Owens for Congress, Inc.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2412 Pine Ridge Rd.		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.4820
City Naples	State FL	
Purpose of Disbursement Bank Fees	001	Candidate Name Brian Owens for Congress, Inc. Category/Type
Candidate Name Brian Owens for Congress, Inc.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Brian Owens for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 2060 ISLA VISTA LN		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4761
City NAPLES	State FL	
Purpose of Disbursement Teller Cash Withdrawal for Brian	001	Candidate Name Brian Owens for Congress, Inc. Category/Type
Candidate Name Brian Owens for Congress, Inc.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	232.00
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 17 OF 41			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Brian Owens for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address 2060 ISLA VISTA LN		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.4773
City NAPLES	State FL	
Zip Code 34105	Purpose of Disbursement Petty Cash	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. Brian Owens for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 2060 ISLA VISTA LN		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4758
City NAPLES	State FL	
Zip Code 34105	Purpose of Disbursement ATM Cash Withdrawal	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. Brian Owens for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 2060 ISLA VISTA LN		Amount of Each Disbursement this Period 87.00 Transaction ID : SB17.4779
City NAPLES	State FL	
Zip Code 34105	Purpose of Disbursement Petty Cash	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).....	437.00
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 18 OF 41			
	<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. Brian Owens for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address 2060 ISLA VISTA LN		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4817
City NAPLES	State FL	
Purpose of Disbursement ATM Cash Withdrawal	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. Brian Owens for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 2060 ISLA VISTA LN		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.4822
City NAPLES	State FL	
Purpose of Disbursement Campaign Expense	007	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. Campaign Graphics		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address P. O. Box 4859		Amount of Each Disbursement this Period 223.55 Transaction ID : SB17.4620
City Ocala	State FL	
Purpose of Disbursement Lapel Stickers	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).....	518.55
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 41			
	<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 of Naples		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 2344 Pine Ridge Road		Amount of Each Disbursement this Period 71.25 Transaction ID : SB17.4543
City Naples	State FL	
Purpose of Disbursement Meeting	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	

Full Name (Last, First, Middle Initial) B. Capriccio of Naples		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address 2344 Pine Ridge Road		Amount of Each Disbursement this Period 31.54 Transaction ID : SB17.4716
City Naples	State FL	
Purpose of Disbursement Dinner Meeting	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	

Full Name (Last, First, Middle Initial) c. Capriccio of Naples		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 2344 Pine Ridge Road		Amount of Each Disbursement this Period 27.21 Transaction ID : SB17.4825
City Naples	State FL	
Purpose of Disbursement Dinner Meeting	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	

SUBTOTAL of Disbursements This Page (optional).....	130.00
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 20 OF 41			
	<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)		Date of Disbursement
A. Direct Mail Systems		M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period
City Clearwater	State FL	Zip Code 33762
Purpose of Disbursement Palm Cards	Category/Type 006	462.66
Candidate Name Brian Owens for Congress, Inc.	Disbursement For: 2012	Transaction ID : SB17.4622
Office Sought: <input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: FL District: 14		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Direct Mail Systems		M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period
City Clearwater	State FL	Zip Code 33762
Purpose of Disbursement Mailing #2	Category/Type 004	11799.93
Candidate Name Brian Owens for Congress, Inc.	Disbursement For: 2012	Transaction ID : SB17.4636
Office Sought: <input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: FL District: 14		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Direct Mail Systems		M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period
City Clearwater	State FL	Zip Code 33762
Purpose of Disbursement Mailing	Category/Type 004	775.35
Candidate Name Brian Owens for Congress, Inc.	Disbursement For: 2012	Transaction ID : SB17.4640
Office Sought: <input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: FL District: 14		

SUBTOTAL of Disbursements This Page (optional).....	13037.94
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 41			
	<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)		Date of Disbursement											
A. Direct Mail Systems		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		19		2012
M M	/	D D	/	Y Y Y Y									
06		19		2012									
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Clearwater</td> <td>FL</td> <td>33762</td> </tr> </table>		City	State	Zip Code	Clearwater	FL	33762	<table border="1"> <tr> <td>1221.87</td> </tr> </table>		1221.87			
City	State	Zip Code											
Clearwater	FL	33762											
1221.87													
Purpose of Disbursement Direct Mail		Transaction ID : SB17.4835											
Candidate Name Brian Owens for Congress, Inc.		Category/Type 003											
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012											
State: FL District: 14		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Direct Mail Systems		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		19		2012
M M	/	D D	/	Y Y Y Y									
06		19		2012									
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Clearwater</td> <td>FL</td> <td>33762</td> </tr> </table>		City	State	Zip Code	Clearwater	FL	33762	<table border="1"> <tr> <td>1519.48</td> </tr> </table>		1519.48			
City	State	Zip Code											
Clearwater	FL	33762											
1519.48													
Purpose of Disbursement Direct Mail		Transaction ID : SB17.4836											
Candidate Name Brian Owens for Congress, Inc.		Category/Type 003											
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012											
State: FL District: 14		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Direct Mail Systems		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		19		2012
M M	/	D D	/	Y Y Y Y									
06		19		2012									
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Clearwater</td> <td>FL</td> <td>33762</td> </tr> </table>		City	State	Zip Code	Clearwater	FL	33762	<table border="1"> <tr> <td>267.50</td> </tr> </table>		267.50			
City	State	Zip Code											
Clearwater	FL	33762											
267.50													
Purpose of Disbursement Direct Mail		Transaction ID : SB17.4837											
Candidate Name Brian Owens for Congress, Inc.		Category/Type 003											
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012											
State: FL District: 14		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	3008.85
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 41
	<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 06 / 29 / 2012
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period 25000.00 Transaction ID : SB17.4858
City Clearwater State FL Zip Code 33762	Purpose of Disbursement Campaign Consulting Services 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. EmbroidMe of Naples		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 5413 Airport Pulling Rd. North		Amount of Each Disbursement this Period 202.46 Transaction ID : SB17.4576
City Naples State FL Zip Code 34109	Purpose of Disbursement Shirt Logos 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) c. EmbroidMe of Naples		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 5413 Airport Pulling Rd. North		Amount of Each Disbursement this Period 57.24 Transaction ID : SB17.4706
City Naples State FL Zip Code 34109	Purpose of Disbursement Mediterra Shirts 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).....	25259.70
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 41			
	<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. Emily Thoenke		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address 3570 21st Avenue SW		Amount of Each Disbursement this Period 116.45 Transaction ID : SB17.4821
City Naples	State FL	
Purpose of Disbursement Expenses	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. ExxonMobil		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 14267 Collier Blvd.		Amount of Each Disbursement this Period 65.51 Transaction ID : SB17.4714
City Naples	State FL	
Purpose of Disbursement Gas	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. Fred's Diner		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 2700 Immokalee Road #12		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.4635
City Naples	State FL	
Purpose of Disbursement Tea Party Event Food	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	

SUBTOTAL of Disbursements This Page (optional).....	581.96
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 41			
	<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. Fred's Diner		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 2700 Immokalee Road #12		Amount of Each Disbursement this Period 21.00
City Naples	State FL	
Zip Code 34110		
Purpose of Disbursement Meeting		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	

Full Name (Last, First, Middle Initial) B. Greater Fort Myers Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 2310 Edwards Drive		Amount of Each Disbursement this Period 200.00
City Fort Myers	State FL	
Zip Code 33901		
Purpose of Disbursement Chamber Membership Advertise		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) c. Patrick Hamlin		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address 1706 Kings Lake Blvd. #106		Amount of Each Disbursement this Period 75.00
City Naples	State FL	
Zip Code 34112		
Purpose of Disbursement Repayment		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).....	296.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41			
	<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. Bob Harden		Date of Disbursement MM / DD / YYYY 04 / 09 / 2012
Mailing Address 8787 Bay Colony Drive #1504		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4616
City Naples	State FL	
Purpose of Disbursement Radio 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. Bob Harden		Date of Disbursement MM / DD / YYYY 05 / 17 / 2012
Mailing Address 8787 Bay Colony Drive #1504		Amount of Each Disbursement this Period 315.00 Transaction ID : SB17.4771
City Naples	State FL	
Purpose of Disbursement Radio Show Ad Fees	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) c. Hess Gas		Date of Disbursement MM / DD / YYYY 04 / 23 / 2012
Mailing Address 1410 Airport Rd. North		Amount of Each Disbursement this Period 107.32 Transaction ID : SB17.4577
City Naples	State FL	
Purpose of Disbursement Gas	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	

SUBTOTAL of Disbursements This Page (optional).....	772.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 41			
	<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. Hess Gas		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 1410 Airport Rd. North		Amount of Each Disbursement this Period 682.88 Transaction ID : SB17.4753
City Naples	State FL	
Purpose of Disbursement Gas and Food for 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. Hess Gas		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 1410 Airport Rd. North		Amount of Each Disbursement this Period 5.22 Transaction ID : SB17.4765
City Naples	State FL	
Purpose of Disbursement	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. Sara Lexington		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2012
Mailing Address		Amount of Each Disbursement this Period 513.33 Transaction ID : SB17.4842
City	State	
Purpose of Disbursement Clerical Help	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).....	682.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 41			
	<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 Daily News		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2012
Mailing Address 1100 Immokalee Road Suite #404		Amount of Each Disbursement this Period 708.10 Transaction ID : SB17.4638
City Naples State FL Zip Code 34110	Purpose of Disbursement 1/4 Page Add 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. Naples Harbour Yacht Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 475 North Road		Amount of Each Disbursement this Period 140.84 Transaction ID : SB17.4757
City Naples State FL Zip Code 34104	Purpose of Disbursement Dinner Meeting 003 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. Office Max		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 3420 Airport Pulling Rd. North		Amount of Each Disbursement this Period 261.90 Transaction ID : SB17.4730
City Naples State FL Zip Code 34105	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		

SUBTOTAL of Disbursements This Page (optional).....	1110.84
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 41			
	<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. Office Max		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 3420 Airport Pulling Rd. North		Amount of Each Disbursement this Period 65.67
City Naples	State FL	
Purpose of Disbursement Office Supplies	Category/ Type 006	Transaction ID : SB17.4733
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. Office Max		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 3420 Airport Pulling Rd. North		Amount of Each Disbursement this Period 137.00
City Naples	State FL	
Purpose of Disbursement Campaign Supplies	Category/ Type 001	Transaction ID : SB17.4826
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. Office Max		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 3420 Airport Pulling Rd. North		Amount of Each Disbursement this Period 206.95
City Naples	State FL	
Purpose of Disbursement Printer Supplies	Category/ Type 001	Transaction ID : SB17.4828
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).....	409.62
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 41			
	<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. Office Max		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 3420 Airport Pulling Rd. North		Amount of Each Disbursement this Period 315.56 Transaction ID : SB17.4846
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. Paychex Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 100.80 Transaction ID : SB17.4599
City Ft. Myers	State FL	
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) c. Paychex Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 5273.17 Transaction ID : SB17.4607
City Ft. Myers	State FL	
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	

SUBTOTAL of Disbursements This Page (optional).....	5689.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 41			
	<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 04 / 27 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 1790.08 Transaction ID : SB17.4608
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 04 / 27 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 113.80 Transaction ID : SB17.4609
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) c. Paychex Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 4511.51 Transaction ID : SB17.4696
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	

SUBTOTAL of Disbursements This Page (optional).....	6415.39
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 31 OF 41			
	<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 05 / 31 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 1553.19 Transaction ID : SB17.4697
City Ft. Myers	State FL	
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 05 / 31 / 2012
Mailing Address 3860 Colonial Blvd. #100		Amount of Each Disbursement this Period 101.17 Transaction ID : SB17.4698
City Ft. Myers	State FL	
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) c. Naples Print Source		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 350 9th St. South		Amount of Each Disbursement this Period 109.39 Transaction ID : SB17.4423
City Naples	State FL	
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	

SUBTOTAL of Disbursements This Page (optional).....	1763.75
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 32 OF 41		
	<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 04 / 05 / 2012
Mailing Address 350 9th St. South		Amount of Each Disbursement this Period 373.12 Transaction ID : SB17.4488
City Naples	State FL	
Purpose of Disbursement Advertising	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) B. Naples Print Source		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2012
Mailing Address 350 9th St. South		Amount of Each Disbursement this Period 55.49 Transaction ID : SB17.4500
City Naples	State FL	
Purpose of Disbursement Petition Forms	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. Naples Print Source		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 350 9th St. South		Amount of Each Disbursement this Period 109.39 Transaction ID : SB17.4731
City Naples	State FL	
Purpose of Disbursement Business Cards	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).....	538.00
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 33 OF 41			
	<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 05 / 25 / 2012
Mailing Address 350 9th St. South		Amount of Each Disbursement this Period 570.17 Transaction ID : SB17.4752
City Naples	State FL	
Purpose of Disbursement Mail Expense	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	

Full Name (Last, First, Middle Initial) B. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 2310 Pine Ridge Road		Amount of Each Disbursement this Period 105.95 Transaction ID : SB17.4847
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. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 2310 Pine Ridge Road		Amount of Each Disbursement this Period 42.48 Transaction ID : SB17.4848
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	

SUBTOTAL of Disbursements This Page (optional).....	718.60
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 41			
	<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 04 / 16 / 2012
Mailing Address 900 Parish St., 4th Floor		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.4499
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement Radio 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. SignPro Graphics Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 2237 J&C Blvd.		Amount of Each Disbursement this Period 499.79 Transaction ID : SB17.4490
City Naples	State FL	
Zip Code 34109	Purpose of Disbursement Advertising	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 04 / 23 / 2012
Mailing Address 2237 J&C Blvd.		Amount of Each Disbursement this Period 28.62 Transaction ID : SB17.4496
City Naples	State FL	
Zip Code 34109	Purpose of Disbursement Yard Sign 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	

SUBTOTAL of Disbursements This Page (optional).....	1428.41
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 41			
	<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. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 6305 Naples Blvd.		Amount of Each Disbursement this Period 50.87
City Naples	State FL	
Purpose of Disbursement Office Supplies	Category/ Type 006	Transaction ID : SB17.4551
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 04 / 11 / 2012
Mailing Address 6305 Naples Blvd.		Amount of Each Disbursement this Period 152.61
City Naples	State FL	
Purpose of Disbursement Office Supplies	Category/ Type 006	Transaction ID : SB17.4556
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 05 / 03 / 2012
Mailing Address 6305 Naples Blvd.		Amount of Each Disbursement this Period 65.26
City Naples	State FL	
Purpose of Disbursement Campagin Office Supplies	Category/ Type 006	Transaction ID : SB17.4707
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).....	268.74
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 36 OF 41	
	<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. SW Florida Hispanic Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 10051 Mcgregor Blvd. Suite #204		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.4574
City Fort Myers State FL Zip Code 33919	Purpose of Disbursement 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. SW Florida Hispanic Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 10051 Mcgregor Blvd. Suite #204		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.4701
City Fort Myers State FL Zip Code 33919	Purpose of Disbursement Lunch Ad Sponsor 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) c. Emily Thoenke		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 3570 21st Ave. SW		Amount of Each Disbursement this Period 555.00 Transaction ID : SB17.4823
City Naples State FL Zip Code 34117	Purpose of Disbursement Milage Reimb. 002 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).....	945.00
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 41			
	<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. US Post Office		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 1200 Goodlette-Frank Rd.		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4734
City Naples	State FL	
Purpose of Disbursement Stamps		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	

Full Name (Last, First, Middle Initial) B. US Post Office		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address 1200 Goodlette-Frank Rd.		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.4747
City Naples	State FL	
Purpose of Disbursement Stamps		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	

Full Name (Last, First, Middle Initial) c. US Post Office		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1200 Goodlette-Frank Rd.		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.4833
City Naples	State FL	
Purpose of Disbursement PO Box		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).....	164.00
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 41			
	<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 04 / 03 / 2012
Mailing Address 1075 Route 34 STE D		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4602
City Matawan	State NJ	
Zip Code 07747	Purpose of Disbursement Accounting 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	

Full Name (Last, First, Middle Initial) B. Christopher Robert Whalen		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 1075 Route 34 STE D		Amount of Each Disbursement this Period 293.70 Transaction ID : SB17.4606
City Matawan	State NJ	
Zip Code 07747	Purpose of Disbursement Accounting 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	

Full Name (Last, First, Middle Initial) c. Christopher Robert Whalen		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 1075 Route 34 STE D		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4809
City Matawan	State NJ	
Zip Code 07747	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	

SUBTOTAL of Disbursements This Page (optional).....	4293.70
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 39 OF 41	
	<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 06 / 01 / 2012
Mailing Address 1075 Route 34 STE D		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4814
City Matawan	State NJ	
Zip Code 07747	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. Christopher Robert Whalen		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 1075 Route 34 STE D		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4834
City Matawan	State NJ	
Zip Code 07747	Purpose of Disbursement July Quartley FEC Filing Work	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.		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:	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	73002.32

**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 40 OF 41
	<input type="checkbox"/> 17 20a <input checked="" 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. Light House Restaurant		Date of Disbursement										
Mailing Address 362 Periwinkle Way		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>21</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		21		2012
M M	/	D D	/	Y Y Y Y								
05		21		2012								
City Sanibel	State FL	Zip Code 33957										
Purpose of Disbursement Lunch Meeting	<table border="1"> <tr> <td>003</td> </tr> </table>		003									
003												
Candidate Name Brian Owens for Congress, Inc.	Amount of Each Disbursement this Period											
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<table border="1"> <tr> <td>27.66</td> </tr> </table>		27.66									
27.66												
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB18.4739											
State: FL District: 14												

Full Name (Last, First, Middle Initial) B.		Date of Disbursement										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement	<table border="1"> <tr> <td></td> </tr> </table>											
Candidate Name	Amount of Each Disbursement this Period											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<table border="1"> <tr> <td></td> </tr> </table>											
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										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement	<table border="1"> <tr> <td></td> </tr> </table>											
Candidate Name	Amount of Each Disbursement this Period											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<table border="1"> <tr> <td></td> </tr> </table>											
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>27.66</td> </tr> </table>	27.66
27.66		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td>27.66</td> </tr> </table>	27.66
27.66		

**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 41 OF 41			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) A. BRIAN OWENS			Date of Disbursement MM / DD / YYYY 06 / 29 / 2012	
Mailing Address 2060 ISLA VISTA LN			Amount of Each Disbursement this Period 5844.57	
City NAPLES	State FL	Zip Code 34105	Transaction ID : SB20A.4859	
Purpose of Disbursement Return of Candidate Contribution		Category/ Type 009		
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.			Date of Disbursement MM / DD / YYYY	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

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

SUBTOTAL of Disbursements This Page (optional).....	5844.57
TOTAL This Period (last page this line number only).....	5844.57