24990921984

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 88
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

NAME OF COMMITTEE (In Full)
Carole Green for Congress

A.
Full Name (Last, First, Middle Initial)
Mark Faulkner
Mailing Address 3051 Cobblestone Drive
City: Milton State: FL Zip Code: 32571-
FEC ID number of contributing federal political committee: C
Name of Employer: Baptist Health of South FL
Occupation: Administrator
Receipt For: 2004
X Primary General
Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 02 18 2004
Transaction ID: 03902004420673
Amount of Each Receipt this Period: 250.00
Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Miguel Fernandez
Mailing Address 5 Tahiti Beach Island Road
City: Miami State: FL Zip Code: 33143-
FEC ID number of contributing federal political committee: C
Name of Employer: CarePlus Health Plans, Inc.
Occupation: CEO
Receipt For: 2004
X Primary General
Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 03 24 2004
Transaction ID: 040420040C826
Amount of Each Receipt this Period: 2000.00
Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Rhonda Floyd-Mellon
Mailing Address 4004 Carenon Lane
City: Valrico State: FL Zip Code: 33594-
FEC ID number of contributing federal political committee: C
Name of Employer: Information Requested
Occupation: Housewife
Receipt For: 2004
X Primary General
Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 03 24 2004
Transaction ID: 04042D040C796
Amount of Each Receipt this Period: 2000.00
Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 4250.00

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