

48 HOURS NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL

Friends of Connie Mack

ADDRESS (number and street)

P.O. Box 519

CITY, STATE, and ZIP CODE

Naples

FL

34106-

2. NAME OF CANDIDATE

Connie Mack

Any information copied from such Reports and Statements may not to 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.

4. FEC IDENTIFICATION NUMBER
C00391243

SIGNATURE(Optional)	DATE 10/25/2006	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

FEC FORM 6 - 48 HOUR NOTICE OF CONTRIBUTIONS / LOANS

(continuation page)

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Name of Individual, Organization, or Corporation

Full Name, Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount Received this Period
American Medical Assoc. PAC 1101 Vermont Ave., N.W. 12th Floor Washington DC 20005		10/24/2006	2000.00
	Occupation		
Darden Rest., Inc. Emp. Good Govt. Fund 5900 Lake Ellenor Drive P.O. Box 593330 Orlando FL 32809		10/24/2006	1000.00
	Occupation		
PCI PAC 2600 S. River Road Des Plaines IL 60018		10/24/2006	1000.00
	Occupation		

TOTAL THIS PERIOD (last page only)**4000.00**