

**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

GLO for Congress

ADDRESS (number and street)

133 South Harbor Drive

Check if different
than previously
reported. (ACC)

Venice

FL

34285

2. FEC IDENTIFICATION NUMBER ▼

C

C00545814

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

05

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

M M / D D / Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
08 / 07 / 2014

through

M M / D D / Y Y Y Y
09 / 30 / 2014

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 Eric Robinson

Signature of Treasurer

Eric Robinson

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 14 / 2014

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

FEC Form 3 (Revised 02/2003)

PAGE 2 / 49

Write or Type Committee Name

GLO for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	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))....	19935.00	111141.85
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	19935.00	111141.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21484.92	105727.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	45.24	130.84
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	21439.68	105597.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5544.78	
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)

PAGE 3 / 49

Write or Type Committee Name

GLO for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

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).....

9965.00

67713.38

(ii) Unitemized.....

6470.00

29428.47

(iii) TOTAL of contributions from individuals ▶

16435.00

97141.85

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

3500.00

5000.00

(d) The Candidate.....

0.00

9000.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

19935.00

111141.85

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.)

45.24

130.84

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)..... ▶

19980.24

111272.69

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 49

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	21484.92	105727.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	21484.92	105727.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7049.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19980.24
25. SUBTOTAL (add Line 23 and Line 24).....	27029.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	21484.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5544.78

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

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

FOR LINE NUMBER:

PAGE 5 OF 49

(check only one)

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

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)

GLO for Congress

Full Name (Last, First, Middle Initial)

J. RICHARD BAKER

A.

Mailing Address 5392 CLIFTON RD

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

FLORIDA ROADS CONSTRUCTION

Occupation

CONSTRUCTION

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2014

Transaction ID : SA11AI.5536

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JEFF CAMARDA

B.

Mailing Address 4371 US HWY 17 #201

City

FLEMING ISLAND

State

FL

Zip Code

32003

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAMARDA FINANCIAL

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.5730

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

HELEN R CHESTNUT

C.

Mailing Address 77 PONTE VEDRA COLONY CIR

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period

50.00

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

1050.00

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

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

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

FOR LINE NUMBER:

PAGE 6 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

TODD L COLEMAN

A.

Mailing Address 11333 PORTSIDE DR

City

JACKSONVILLE

State

FL

Zip Code

32225

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHIC FILA

Occupation

BUSINESS OWNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2014

Transaction ID : SA11AI.5813

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN DAVID COXWELL

B.

Mailing Address 3490 OTIS RD

City

JACKSONVILLE

State

FL

Zip Code

32220

FEC ID number of contributing
federal political committee.

C

Name of Employer

JB COXWELL

Occupation

CONTRUCTION

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.5523

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ELIZABETH ANN FRANCIS

C.

Mailing Address 3512 OGLEBAY DR

City

GREEN COVE SPRINGS

State

FL

Zip Code

32043

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.5698

Amount of Each Receipt this Period

600.00

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

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

1850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

WILLIAM C HORNE**A.**

Mailing Address 6324 DICKENS DR

City

JACKSONVILLE

State

FL

Zip Code

32244

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		15		2014

Transaction ID : SA11AI.5575

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

WILLIAM C HORNE**B.**

Mailing Address 6324 DICKENS DR

City

JACKSONVILLE

State

FL

Zip Code

32244

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.5772

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

RICKEY HOWARD**C.**

Mailing Address 1738 COLONIAL DR

City

GREEN COVE SPRINGS

State

FL

Zip Code

32043

FEC ID number of contributing
federal political committee.

C

Name of Employer

AIR TO AIR INC

Occupation

A/C CONTRACTOR

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.5849

Amount of Each Receipt this Period

250.00

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

315.00

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

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

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

FOR LINE NUMBER:

PAGE 8 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

MICHAEL JACKSON

A.

Mailing Address 384 TIEDEWATER CIR N

City

JACKSONVILLE

State

FL

Zip Code

32211

FEC ID number of contributing
federal political committee.

C

Name of Employer

TECTRON ENGINEERING

Occupation

ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2014

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

AJ JOHNS

B.

Mailing Address 12608 MANDARIN RD

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing
federal political committee.

C

Name of Employer

AJ JOHNS INC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2014

Transaction ID : SA11AI.5553

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

KEITH KESSLER

C.

Mailing Address 12718 CORMORANT COVE

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing
federal political committee.

C

Name of Employer

KESSLER CREATIVE

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2014

Transaction ID : SA11AI.5609

Amount of Each Receipt this Period

250.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

KEITH KESSLER

Mailing Address 12718 CORMORANT COVE

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing
federal political committee.

C

Name of Employer
KESSLER CREATIVEOccupation
EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.5857

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN W KIRKLAND

Mailing Address 13972 N COUNTY RD 23-A

City

MACCLENNY

State

FL

Zip Code

32063

FEC ID number of contributing
federal political committee.

C

Name of Employer
AJ JOHNSOccupation
CONSTRUCTION

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		07		2014

Transaction ID : SA11AI.5552

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

WALTER V KLOSS

Mailing Address 3167 FIELDCREST DR

City

MIDDLEBURG

State

FL

Zip Code

32068

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANTMAN GROUPOccupation
ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.5728

Amount of Each Receipt this Period

250.00

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

850.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 49

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

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NAME OF COMMITTEE (In Full)
GLO for Congress

A. Full Name (Last, First, Middle Initial)
CARLYLE R MARTIN

Mailing Address **1893 KINGLSEY AVE**

City State Zip Code
ORANGE PARK FL 32073

FEC ID number of contributing
federal political committee.**C**Name of Employer
MARTIN PROPERTIESOccupation
REAL ESTATE

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : SA11AI.5843

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
BRUCE D NIPPER

Mailing Address **P O BOX 26122**

City State Zip Code
JACKSONVILLE FL 32226

FEC ID number of contributing
federal political committee.**C**Name of Employer
TROUT RIVER FISH COMPANYOccupation
FISHERMAN

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

Transaction ID : SA11AI.5800

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
FITZHUGH K POWELL Jr.

Mailing Address **219 N NEWNAN ST**

City State Zip Code
JACKSONVILLE FL 32202

FEC ID number of contributing
federal political committee.**C**Name of Employer
CECIL W POWELL & COMPANYOccupation
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		07		2014

Transaction ID : SA11AI.5555

Amount of Each Receipt this Period

250.00**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**1250.00**

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

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

FOR LINE NUMBER:

PAGE 11 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

PAUL R PRINCE

A.

Mailing Address 9149 AGINCOURT LANE

City

JACKSONVILLE

State

FL

Zip Code

32257

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.5720

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

KENNETH PURCELL

B.

Mailing Address P O BOX 43669

City

JACKSONVILLE

State

FL

Zip Code

32203

FEC ID number of contributing
federal political committee.

C

Name of Employer

PURCELL INVESTMENTS LLC

Occupation

INVESTOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.5796

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JAMES R SAALFIELD

C.

Mailing Address 214 30TH AVE S

City

JACKSONVILLE

State

FL

Zip Code

32250

FEC ID number of contributing
federal political committee.

C

Name of Employer

BEARD EQUIPMENT CO

Occupation

SALES

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2014

Transaction ID : SA11AI.5776

Amount of Each Receipt this Period

1000.00

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

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

2300.00

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

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

FOR LINE NUMBER:

PAGE 12 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

TOM SLADE

A.

Mailing Address 2119 WINTERBOURNE

City

ORANGE PARK

State

FL

Zip Code

32073

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		25		2014

Transaction ID : SA11AI.5696

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

JOHN STURM

B.

Mailing Address 611 PONTE VEDRA BLVD

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.5846

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

LYNN WATSON

C.

Mailing Address 2371 BRIDGETTE WAY

City

FLEMING ISLAND

State

FL

Zip Code

32003

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		18		2014

Transaction ID : SA11AI.5588

Amount of Each Receipt this Period

200.00

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

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

600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

MICHAEL W WOODALL**A.**

Mailing Address P O BOX 60218

City

JACKSONVILLE

State

FL

Zip Code

32236

FEC ID number of contributing
federal political committee.

C

Name of Employer
JOHN WOODY INCOccupation
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2014

Transaction ID : SA11AI.5548

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CINDY YOUELL**B.**

Mailing Address 351 PRIMA VERA COVE

City

ALTAMONTE SPRINGS

State

FL

Zip Code

32714

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2014

Transaction ID : SA11AI.5605

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.

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 M	/	D 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).....

750.00

9965.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 49

(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

BLACK REPUBLICAN PAC

Mailing Address 2776 S ARLINGTON MILL DR #806

ATTN: SCOTT B MACKENZIE

City	State	Zip Code
ARLINGTON	VA	22206

FEC ID number of contributing federal political committee.

C C00437053

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11C.5854

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

VIGOP

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

FEC ID number of contributing federal political committee.

C C00553560

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : SA11C.5852

Amount of Each Receipt this Period

2500.00

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 M	/	D D D	/	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).....

3500.00

3500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. CARL ALLEN

Mailing Address P O BOX 11835

City	State	Zip Code
JACKSONVILLE	FL	32239

Purpose of Disbursement
DJ SERVICES @ 8/26 EVENT

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5694

B. NICOLE ALOI

Mailing Address 1859 E ADAMS ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CLERICAL WORK

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.5668

C. NICOLE ALOI

Mailing Address 1859 E ADAMS ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CAMPAIGN ADMIN WORKER

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.5876

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

600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. NICOLE ALOI

Mailing Address 1859 E ADAMS ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CAMPAIGN ADMIN WORKER

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 12 / 2014

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.5919

B. NICOLE ALOI

Mailing Address 1859 E ADAMS ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CAMPAIGN ADMIN WORK

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 19 / 2014

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.5943

C. NICOLE ALOI

Mailing Address 1859 E ADAMS ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CAMPAIGN ADMIN WORK

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 29 / 2014

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.5965

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

225.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. ASHLEY ST CATERING

Mailing Address 613 W ASHLEY ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CATERING FOR 8/26 EVENT

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

1065.00

Transaction ID : SB17.5672

B. COMMODORES POINT PROPERTIES LTD

Mailing Address 1 INDEPENDENT DR #1600

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
UTILITIES FOR CAMPAIGN OFFICE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

332.89

Transaction ID : SB17.5629

C. COMMODORES POINT PROPERTIES LTD

Mailing Address 1 INDEPENDENT DR #1600

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
OFFICE RENT

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

535.00

Transaction ID : SB17.5669

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

1932.89

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. COMMODORES POINT PROPERTIES LTD

Mailing Address 1 INDEPENDENT DR #1600

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		25		2014

City	State	Zip Code
JACKSONVILLE	FL	32202

Amount of Each Disbursement this Period

535.00

Purpose of Disbursement
OFFICE RENTCategory/
Type

Transaction ID : SB17.5963

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. CORR DIGITAL

Mailing Address 6100 PHILLIPS HWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2014

City	State	Zip Code
JACKSONVILLE	FL	32216

Amount of Each Disbursement this Period

4608.22

Purpose of Disbursement
CAMPAIGN SIGNS

001

Category/
Type

Transaction ID : SB17.5921

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. COURTNEY FORNOF

Mailing Address 4815 SE 11TH PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

City	State	Zip Code
OCALA	FL	34471

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
CAMPAIGN ADMIN WORK

001

Category/
Type

Transaction ID : SB17.5872

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

5343.22

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. JACKSON UNIFORM MAN INC

Mailing Address 1642 N MAIN ST

City	State	Zip Code
JACKSONVILLE	FL	32206

Purpose of Disbursement
PRINTING-CAMPAIGN TSHIRTS

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

264.00

Transaction ID : SB17.5891

B. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17.5756

C. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2014

Amount of Each Disbursement this Period

7.19

Transaction ID : SB17.5559

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

300.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

8.34

Transaction ID : SB17.5563

B. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

29.00

Transaction ID : SB17.5757

C. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 14 / 2014

Amount of Each Disbursement this Period

5.75

Transaction ID : SB17.5569

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

43.09

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

7.19

Transaction ID : SB17.5580

B. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2014

Amount of Each Disbursement this Period

23.01

Transaction ID : SB17.5585

C. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		20		2014

Amount of Each Disbursement this Period

5.76

Transaction ID : SB17.5595

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

35.96

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

30.19

Transaction ID : SB17.5602

B. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2014

Amount of Each Disbursement this Period

14.38

Transaction ID : SB17.5607

C. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

2.88

Transaction ID : SB17.5610

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

47.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2014

Amount of Each Disbursement this Period

5.72

Transaction ID : SB17.5736

B. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

4.32

Transaction ID : SB17.5740

C. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

1.44

Transaction ID : SB17.5758

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

11.48

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

1.44

Transaction ID : SB17.5817

B. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2014

Amount of Each Disbursement this Period

5.75

Transaction ID : SB17.5820

C. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2014

Amount of Each Disbursement this Period

7.19

Transaction ID : SB17.5823

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

14.38

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 49

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City State Zip Code
AUSTIN TX 78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 25 / 2014

Amount of Each Disbursement this Period

1.44

Transaction ID : SB17.5828

B. PIRYX

Mailing Address 401 W 15TH ST

City State Zip Code
AUSTIN TX 78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2014

Amount of Each Disbursement this Period

28.75

Transaction ID : SB17.5856

C. PIRYX

Mailing Address 401 W 15TH ST

City State Zip Code
AUSTIN TX 78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2014

Amount of Each Disbursement this Period

8.05

Transaction ID : SB17.5858

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

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

38.24

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 401 W 15TH ST

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

Amount of Each Disbursement this Period

11.51

Transaction ID : SB17.5863

B. REPUBLIC POLLING INC

Mailing Address 2711 CENTERVILLE RD #400

City	State	Zip Code
WILMINGTON	DE	19801

Purpose of Disbursement
FUNDRAISING CONSULTANT FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5624

C. REPUBLIC POLLING INC

Mailing Address 2711 CENTERVILLE RD #400

City	State	Zip Code
WILMINGTON	DE	19801

Purpose of Disbursement
FUNDRAISING CONSULTING FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5899

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

3511.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. ROBINSON HANKS YOUNG & ROBERTS PA

Mailing Address 133 S HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
REIMB FOR FEDEX CHARGES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

78.72

Transaction ID : SB17.5645

B. FEDERAL EXPRESS

Mailing Address 942 S SHADY GROVE RD

City	State	Zip Code
MEMPHIS	TN	38120

Purpose of Disbursement
SHIPPING COSTS

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

78.72

Transaction ID : SB17.5645.0

[MEMO ITEM]

C. ROBINSON HANKS YOUNG & ROBERTS PA

Mailing Address 133 S HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
REIMB FOR FEDEX CHARGES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

85.02

Transaction ID : SB17.5670

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

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

163.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 942 S SHADY GROVE RD

City	State	Zip Code
MEMPHIS	TN	38120

Purpose of Disbursement
SHIPPING COSTS

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

85.02

Transaction ID : SB17.5670.0

[MEMO ITEM]**B. ROBINSON HANKS YOUNG & ROBERTS PA**

Mailing Address 133 S HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
ACCOUNTING SERVICES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5875

C. ROBINSON HANKS YOUNG & ROBERTS PA

Mailing Address 133 S HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
REIMB FOR FEDEX CHARGES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

98.33

Transaction ID : SB17.5917

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

598.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 942 S SHADY GROVE RD

City	State	Zip Code
MEMPHIS	TN	38120

Purpose of Disbursement
SHIPPING CHARGES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

98.33

Transaction ID : SB17.5917.0

[MEMO ITEM]

B. ROBINSON HANKS YOUNG & ROBERTS PA

Mailing Address 133 S HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
REIMB FOR FEDEX CHARGES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

42.94

Transaction ID : SB17.5966

C. FEDERAL EXPRESS

Mailing Address 942 S SHADY GROVE RD

City	State	Zip Code
MEMPHIS	TN	38120

Purpose of Disbursement
SHIPPING COSTSCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

42.94

Transaction ID : SB17.5966.0

[MEMO ITEM]

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

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

42.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. ROSEN SHINGLE CREEK HOTEL

Mailing Address 9939 UNIVERSAL BLVD

City	State	Zip Code
ORLANDO	FL	32819

Purpose of Disbursement
HOTEL CHARGE

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

Amount of Each Disbursement this Period

334.14

Transaction ID : SB17.5915

B. ROSEN SHINGLE CREEK HOTEL

Mailing Address 9939 UNIVERSAL BLVD

City	State	Zip Code
ORLANDO	FL	32819

Purpose of Disbursement
HOTEL ROOM CHARGE

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

111.38

Transaction ID : SB17.5916

C. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

001

Category/
Type

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: FL

District: 05

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

208.47

Transaction ID : SB17.5613

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

653.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. SAMS CLUB

Mailing Address 10690 BEACH BLVD

City	State	Zip Code
JACKSONVILLE	FL	32246

Purpose of Disbursement
FOOD FOR FUNDRAISER

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

57.88

Transaction ID : SB17.5613.0

[MEMO ITEM]

B. WALMART

Mailing Address 1505 COUNTY RD 220

City	State	Zip Code
ORANGE PARK	FL	32003

Purpose of Disbursement
OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

27.20

Transaction ID : SB17.5613.1

[MEMO ITEM]

C. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2014

Amount of Each Disbursement this Period

37.02

Transaction ID : SB17.5613.5

[MEMO ITEM]

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

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

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

002

Category/
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: FL District: 05

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

274.78

Transaction ID : SB17.5630

B. RACETRAC

Mailing Address 3106 HIGHWAY 17

City	State	Zip Code
GREEN COVE	FL	32043

Purpose of Disbursement
FUEL

002

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2014

Amount of Each Disbursement this Period

46.77

Transaction ID : SB17.5630.0

[MEMO ITEM]

C. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

001

Category/
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: FL District: 05

Date of Disbursement

M M / D D / Y Y Y Y
08 / 19 / 2014

Amount of Each Disbursement this Period

307.35

Transaction ID : SB17.5649

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

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

582.13

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. SHELL OIL

Mailing Address 1531 COUNTY RD 2

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

19.83

Transaction ID : SB17.5649.1

[MEMO ITEM]

B. RACETRAC

Mailing Address 3106 HIGHWAY 17

City	State	Zip Code
GREEN COVE	FL	32043

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

34.80

Transaction ID : SB17.5649.3

[MEMO ITEM]

C. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

002

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

40.02

Transaction ID : SB17.5649.4

[MEMO ITEM]

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

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

339.43

Transaction ID : SB17.5649.5

[MEMO ITEM]

B. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		19		2014

Amount of Each Disbursement this Period

31.65

Transaction ID : SB17.5649.7

[MEMO ITEM]

C. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

002

Category/
Type

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: FL

District: 05

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

339.43

Transaction ID : SB17.5673

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

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

339.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address 1911 WELLS RD

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
CELL PHONE CHARGES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.5673.0

[MEMO ITEM]

B. VERIZON WIRELESS

Mailing Address 1911 WELLS RD

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
CELL PHONE CHARGES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.5673.2

[MEMO ITEM]

C. VERIZON WIRELESS

Mailing Address 1911 WELLS RD

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
CELL PHONE CHARGES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2014

Amount of Each Disbursement this Period

53.50

Transaction ID : SB17.5673.5

[MEMO ITEM]

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

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: FL District: 05

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2014

Amount of Each Disbursement this Period

250.14

Transaction ID : SB17.5878

B. VERIZON WIRELESS

Mailing Address 1911 WELLS RD

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
CELL PHONE CHARGES

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.5878.0

[MEMO ITEM]

C. SHELL OIL

Mailing Address 1531 COUNTY RD 2

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL-TRAVEL EXPENSE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.5878.2

[MEMO ITEM]

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

250.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

001

Category/
Type

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: FL District: 05

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

107.00

Transaction ID : SB17.5887

B. STAPLES

Mailing Address 700-16 SOUTH BLANDING BLVD

City	State	Zip Code
ORANGE PARK	FL	32065

Purpose of Disbursement
OFFICE SUPPLIS-BUSINESS CARDSCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

107.00

Transaction ID : SB17.5887.0

[MEMO ITEM]

C. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

002

Category/
Type

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify)

State: FL District: 05

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

156.82

Transaction ID : SB17.5902

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

263.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: FL District: 05

Date of Disbursement

M M / D D / Y Y Y Y
09 / 08 / 2014

Amount of Each Disbursement this Period

332.49

Transaction ID : SB17.5906

B. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 08 / 2014

Amount of Each Disbursement this Period

40.01

Transaction ID : SB17.5906.0

[MEMO ITEM]

C. HOME DEPOT

Mailing Address 1575 COUNTY RD 220

City	State	Zip Code
ORANGE PARK	FL	32003

Purpose of Disbursement
SUPPLIES TO INSTALL SIGNS

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	---	--

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 08 / 2014

Amount of Each Disbursement this Period

65.60

Transaction ID : SB17.5906.6

[MEMO ITEM]

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

332.49

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

001

Category/
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: FL District: 05

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5930

B. VERIZON WIRELESS

Mailing Address 1911 WELLS RD

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
CELL PHONE CHARGES

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.5930.0

[MEMO ITEM]

C. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUELCategory/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2014

Amount of Each Disbursement this Period

43.00

Transaction ID : SB17.5930.2

[MEMO ITEM]

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

250.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. HOME DEPOT

Mailing Address 1575 COUNTY RD 220

City	State	Zip Code
ORANGE PARK	FL	32003

Purpose of Disbursement
WATER & ICE FOR WORKERS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

7.65

Transaction ID : SB17.5930.3

[MEMO ITEM]

B. HOME DEPOT

Mailing Address 1575 COUNTY RD 220

City	State	Zip Code
ORANGE PARK	FL	32003

Purpose of Disbursement
SUPPLIES FOR SIGN INSTALLATION

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

13.64

Transaction ID : SB17.5930.5

[MEMO ITEM]

C. GLOREATHA SCURRY-SMITH

Mailing Address 1661 CINNAMON FERN COURT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: FL

District: 05

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

231.28

Transaction ID : SB17.5944

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

231.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

54.86

Transaction ID : SB17.5944.3

[MEMO ITEM]**B. CASSANDRA SMITH**

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
CAMPAIGN ADMIN WORKER

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5877

C. CASSANDRA SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
CAMPAIGN ADMIN WORKER

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5920

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

375.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. CASSANDRA SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
CAMPAIGN ADMIN WORK

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 19 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5942

B. CASSANDRA SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSECategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 22 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5959

C. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E JEFFERSON

City	State	Zip Code
TALLAHASSEE	FL	32399

Purpose of Disbursement
TICKETS TO REPUBLICAN EVENT IN ORLANDOCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 22 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5959.0

[MEMO ITEM]

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

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

250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. CASSANDRA SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
CAMPAIGN ADMIN WORK

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

428.75

Transaction ID : SB17.5964

B. MICHAEL SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR TRAVEL EXPENSES

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

303.75

Transaction ID : SB17.5664

C. ROSEN SHINGLE CREEK HOTEL

Mailing Address 9939 UNIVERSAL BLVD

City	State	Zip Code
ORLANDO	FL	32819

Purpose of Disbursement
HOTEL CHARGES

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2014

Amount of Each Disbursement this Period

303.75

Transaction ID : SB17.5664.0

[MEMO ITEM]

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

428.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. MICHAEL SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
08 / 27 / 2014

Amount of Each Disbursement this Period

201.57

Transaction ID : SB17.5682

B. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
08 / 27 / 2014

Amount of Each Disbursement this Period

25.01

Transaction ID : SB17.5682.3

[MEMO ITEM]

C. MICHAEL SMITH

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR TRAVEL EXPENSES

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
09 / 04 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.5897

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

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

251.57

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2014

Amount of Each Disbursement this Period

186.02

Transaction ID : SB17.5897.0

[MEMO ITEM]**B. MICHAEL SMITH**

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSES

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

186.02

Transaction ID : SB17.5922

C. GATE GAS STATION

Mailing Address 3210 US HWY 17

City	State	Zip Code
ORANGE PARK	FL	32073

Purpose of Disbursement
FUELCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

60.80

Transaction ID : SB17.5922.2

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

186.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. RACETRAC

Mailing Address 3106 HIGHWAY 17

City	State	Zip Code
GREEN COVE	FL	32043

Purpose of Disbursement
FUEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5922.3

[MEMO ITEM]**B. MICHAEL SMITH**

Mailing Address 1661 CINNAMON FERN CT

City	State	Zip Code
FLEMING ISLAND	FL	32003

Purpose of Disbursement
REIMB FOR CAMPAIGN EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5961

C. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E JEFFERSON

City	State	Zip Code
TALLAHASSEE	FL	32399

Purpose of Disbursement
TICKET TO REPUBLICAN EVENT IN ORLANDO

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.5961.0

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

125.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. THE BLACK EXPO

Mailing Address 1806 WASHINGTON ST

City	State	Zip Code
COLUMBIA	SC	29201

Purpose of Disbursement
EVENT TICKETS

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

390.00

Transaction ID : SB17.5889

B. THE GARDEN CLUB OF JACKSONVILLE

Mailing Address 1005 RIVERSIDE AVE

City	State	Zip Code
JACKSONVILLE	FL	32204

Purpose of Disbursement
CATERING FOR EVENT

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2014

Amount of Each Disbursement this Period

1367.46

Transaction ID : SB17.5667

C. BRITTANY TONY

Mailing Address 11 E FORSYTH ST #803

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
CAMPAIGN MANAGEMENT FEE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.5871

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

2357.46

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 49

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

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NAME OF COMMITTEE (In Full)

GLO for Congress

Full Name (Last, First, Middle Initial)

A. VIVID IMAGES USA INC

Mailing Address 1730 E DUVAL ST

City	State	Zip Code
JACKSONVILLE	FL	32202

Purpose of Disbursement
PRINTING-CAMPAIGN T-SHIRTS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

330.00

Transaction ID : SB17.5873

B. WEBELECT.NET

Mailing Address 1256 VINETREE DR

City	State	Zip Code
BRANDON	FL	33510

Purpose of Disbursement
CAMPAIGN SOFTWARE RENWAL FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2014

Amount of Each Disbursement this Period

270.00

Transaction ID : SB17.5874

C. WEBELECT.NET

Mailing Address 1256 VINETREE DR

City	State	Zip Code
BRANDON	FL	33510

Purpose of Disbursement
CAMPAIGN SOFTWARE RENEWAL FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2014

Amount of Each Disbursement this Period

270.00

Transaction ID : SB17.5968

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

870.00

20674.19