

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

Friends of Chauncey Goss

ADDRESS (number and street) ▼

PO Box 07298

Check if different than previously reported. (ACC)

Fort Myers

FL

33919

2. **FEC IDENTIFICATION NUMBER** ▼

C C00505370

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

FL

19

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

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mrs. Sally Frizzell Coleman CPA PA

Signature of Treasurer Mrs. Sally Frizzell Coleman CPA PA [Electronically Filed] Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Chauncey Goss

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	184124.05	389445.05
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	184124.05	389445.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	135676.67	199050.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	13.5	13.5
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	135663.17	199037.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	197467.65	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	7269.23	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Chauncey Goss

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	158102.14	332097.14
(ii) Unitemized	21021.91	39847.91
(iii) TOTAL of contributions from individuals	179124.05	371945.05
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	5000	17500
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	184124.05	389445.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....		7059.83
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		7059.83
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	13.5	13.5
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	184137.55	396518.38

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	135676.67	199050.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	135676.67	199050.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	149006.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	184137.55
25. SUBTOTAL (add Line 23 and Line 24).....	333144.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	135676.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	197467.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Dick C Ackert

Mailing Address 9330 Triana Ter
#1

City Fort Myers State FL Zip Code 33912

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN614

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Linda Sue Ackert

Mailing Address 9330 Triana Ter
#1

City Fort Myers State FL Zip Code 33912

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN615

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Hal Adams

Mailing Address 1642 Medical Lane Ste A

City Fort Myers State FL Zip Code 33907

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

Name of Employer Hal Adams PA Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2012

Transaction ID : SA11Ai-CN378

Amount of Each Receipt this Period
250

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 6 OF 132
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Arthur L Allen

Mailing Address 2500 Gordon Dr

City Naples State FL Zip Code 34102

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

Name of Employer ASG Software Occupation Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN809

Amount of Each Receipt this Period
2500

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

Mailing Address 279 Rosebrook Road

City New Canaan State CT Zip Code 06840

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

Name of Employer Greer Anderson Capital LLC Occupation Investments

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11Ai-CN830

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
J. Keith Arnold

Mailing Address 14101 River Rd

City Fort Myers State FL Zip Code 33905

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

Name of Employer Fowler White Boggs Occupation Government Affairs Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN866

Amount of Each Receipt this Period
500

In-Kind Received food

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Paul Stewart Atkins

Mailing Address 4713 Rock Spg Rd

City	State	Zip Code
Arlington	VA	22207

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

Name of Employer	Occupation
Patomak Partners LLC	Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2012

Transaction ID : SA11Ai-CN824

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Mr. Paul Stewart Atkins

Mailing Address 4713 Rock Spg Rd

City	State	Zip Code
Arlington	VA	22207

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

Name of Employer	Occupation
Patomak Partners LLC	Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2012

Transaction ID : SA11Ai-CN1081

Amount of Each Receipt this Period
-2500

Reattributed to Sarah Atkins

[MEMO ITEM]
Reattributed

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

Mailing Address 4713 Rock Spring Road

City	State	Zip Code
Arlington	VA	22207

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

Name of Employer	Occupation
Tamko Building Products	Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2012

Transaction ID : SA11Ai-CN1082

Amount of Each Receipt this Period
2500

Reattributed from Paul Atkins

[MEMO ITEM]
Reattribution

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. David Ayres

Mailing Address 3647 N. Harrison Street

City: Arlington State: VA Zip Code: 22207

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

Name of Employer: The Ashcroft Group Occupation: President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 05 / 01 / 2012

Transaction ID : SA11Ai-CN514

Amount of Each Receipt this Period: 250

B. Full Name (Last, First, Middle Initial)
Ms. Laura Ayres

Mailing Address 3647 N. Harrison Street

City: Arlington State: VA Zip Code: 22207

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 05 / 01 / 2012

Transaction ID : SA11Ai-CN515

Amount of Each Receipt this Period: 250

C. Full Name (Last, First, Middle Initial)
Charlotte A Baliatico

Mailing Address 168 Via Napoli

City: Naples State: FL Zip Code: 34105

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 350

Date of Receipt: 06 / 29 / 2012

Transaction ID : SA11Ai-CN797

Amount of Each Receipt this Period: 100

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mary Bannon

Mailing Address 4720 N. 32nd Street

City	State	Zip Code
Arlington	VA	22207

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

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11Ai-CN829

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
Frederick Thurman Barber Iii

Mailing Address 42 9th St

City	State	Zip Code
Bonita Springs	FL	34134

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

Name of Employer	Occupation
Agnoli Barber & Brundage Inc.	Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2012

Transaction ID : SA11Ai-CN544

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Evie J Barnes

Mailing Address 159 Bay Mar Dr

City	State	Zip Code
Fort Myers Beach	FL	33931

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

Name of Employer	Occupation
Barnes Property Zoomers	Real Estate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012

Transaction ID : SA11Ai-CN763

Amount of Each Receipt this Period
500

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
David Alan Barton

Mailing Address 5718 Driftwood Pky

City State Zip Code
Cape Coral FL 33904

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

Name of Employer Occupation
Self Employed Real Estate Developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 31 2012

Transaction ID : SA11Ai-CN646

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Margaret A Barton

Mailing Address 5718 Driftwood Pky

City State Zip Code
Cape Coral FL 33904

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

Name of Employer Occupation
Self Employed Real Estate Developer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 31 2012

Transaction ID : SA11Ai-CN647

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Patricia M Barton

Mailing Address 605 Palm Cir E

City State Zip Code
Naples FL 34102

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
603.93

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 12 2012

Transaction ID : SA11Ai-CN850

Amount of Each Receipt this Period
603.93

In-Kind Received food & beverage

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

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

1103.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 132	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. William L Barton

Mailing Address 605 Palm Cr E

City Naples State FL Zip Code 34102

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1603.93**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 12 / 2012

Transaction ID : SA11Ai-CN849

Amount of Each Receipt this Period
603.93

In-Kind Received Food & beverage

B. Full Name (Last, First, Middle Initial)
Samira K Beckwith

Mailing Address 17080 Harbour Point Dr
Unit #1212

City Fort Myers State FL Zip Code 33908

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

Name of Employer Hope Healthcare Services Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN630

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Kathleen M Belcastro

Mailing Address 1903 SE 32nd Ter

City Cape Coral State FL Zip Code 33904

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

Name of Employer Canterbury School Occupation Administrator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN727

Amount of Each Receipt this Period
250

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

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

1353.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) Vincent J Belcastro		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2012
Mailing Address 1903 SE 32nd Ter		Transaction ID : SA11Ai-CN726
City Cape Coral	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Self	Occupation Doctor	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350	

Full Name (Last, First, Middle Initial) Elizabeth B Blau		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address 1501 Gasparilla Rd		Transaction ID : SA11Ai-CN672
City Boca Grande	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Lawrence M Blau		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address 1501 Gasparilla Rd		Transaction ID : SA11Ai-CN671
City Boca Grande	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200	

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 13 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Frank A. Bonsal Jr

Mailing Address 14040 Mantua Mill Road

City glyndon State MD Zip Code 21136

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2012

Transaction ID : SA11Ai-CN457

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Richard A Botthof

Mailing Address 9121 Troon Lakes Dr

City Naples State FL Zip Code 34109

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

Name of Employer The Naples Trust Company Occupation Financial Services

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : SA11Ai-CN542

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Ms. Linda L. Brown

Mailing Address 14850 Crystal Cove Court #401

City Fort Myers State FL Zip Code 33919

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

Name of Employer Self Employed Occupation Nurse Practitioner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11Ai-CN643

Amount of Each Receipt this Period
150

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
W. L. Lyons Brown

Mailing Address 770 Park Ave

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN432

Amount of Each Receipt this Period
2500

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

Mailing Address 154 Balls Hill Rd.

City State Zip Code
Concord MA 01742-5301

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2012

Transaction ID : SA11Ai-CN422

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Daniel Woolsey Brundage

Mailing Address 2695 66th St SW

City State Zip Code
Naples FL 34105

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

Name of Employer Occupation
Agnoli Barber & Brundage Inc. Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11Ai-CN538

Amount of Each Receipt this Period
250

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Peter Burke		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 17 / 2012
Mailing Address 6 Crawford Rd		Transaction ID : SA11Ai-CN408
City Harrison	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Chilton Investment Company	Occupation Trader	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Nancy B Burton		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2012
Mailing Address 6181 Tidewater Island Cir		Transaction ID : SA11Ai-CN575
City Fort Myers	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) C. Mr. William H. T. Bush		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012
Mailing Address 37 Picardy Lane		Transaction ID : SA11Ai-CN561
City Saint Louis	State MO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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: (check only one)	PAGE 16 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Roland Caldwell Jr

Mailing Address 201 Center Road

City Venice State FL Zip Code 34285

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

Name of Employer Caldwell Trust Company Occupation Trust Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN660

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
R Scott Cameron

Mailing Address 2390 N. Tamiami Trail #100

City Naples State FL Zip Code 34103

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

Name of Employer Cameron Real Estate Service Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11Ai-CN683

Amount of Each Receipt this Period
250

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

Mailing Address 5070 North Highway A1A

City Vero Beach State FL Zip Code 32963

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

Name of Employer Carney Sandoe & Assoc Occupation Educational Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2012

Transaction ID : SA11Ai-CN653

Amount of Each Receipt this Period
250

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. William J Carroll

Mailing Address 3336 Founders Club Drive

City Sarasota State FL Zip Code 34240

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

Name of Employer Sotheby's Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

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

Transaction ID : SA11Ai-CN658

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Todd A Caruso

Mailing Address 15400 Sweetwater Ct

City Fort Myers State FL Zip Code 33912

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

Name of Employer McHale Caruso Scullion And Knox Occupation CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11Ai-CN467

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Tracey Coppin Caruso

Mailing Address 15400 Sweetwater Ct

City Fort Myers State FL Zip Code 33912

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11Ai-CN468

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 18 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
B J Casey

Mailing Address 89 Logan Road

City State Zip Code
New Canaan CT 06840

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

Name of Employer Occupation
Chilton Client Relations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN430

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Ralph W Clark

Mailing Address 6021 Clam Bayou Ln

City State Zip Code
Sanibel FL 33957

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11Ai-CN804

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Carl Joseph Coleman

Mailing Address 2104 West First St #2503

City State Zip Code
Fort Myers FL 33901

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

Name of Employer Occupation
Fowler White Boggs Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN867

Amount of Each Receipt this Period
1000

In-Kind Received food

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Robert J Coleman

Mailing Address 1481 Argyle Dr

City Fort Myers State FL Zip Code 33919

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

Name of Employer Coleman And Coleman PA Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN618

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
David F Collins

Mailing Address 6458 Griffin Blvd

City Fort Myers State FL Zip Code 33908

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

Name of Employer Mutual Of Omaha Bank Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2012

Transaction ID : SA11Ai-CN525

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Douglass J Congress

Mailing Address 1054 Seahawk Ln

City Sanibel State FL Zip Code 33957

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

Name of Employer Self Occupation Finance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012

Transaction ID : SA11Ai-CN550

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 20 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Melissa Weiss Congress		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 25 / 2012
Mailing Address 1990 Sunrise Cir		Transaction ID : SA11Ai-CN607
City Sanibel	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Congress Limited Inc	Occupation Retailer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Melissa Weiss Congress		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 1990 Sunrise Cir		Transaction ID : SA11Ai-CN831
City Sanibel	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Congress Limited Inc	Occupation Retailer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750	

Full Name (Last, First, Middle Initial) C. Scot M Congress		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2012
Mailing Address 1990 Sunrise Cir		Transaction ID : SA11Ai-CN608
City Sanibel	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Congress Limited Inc	Occupation Retailer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 21 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Joe Bruce Cox

Mailing Address 2450 Treasure Ln

City Naples State FL Zip Code 34102

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

Name of Employer Cox And Carlson Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2012

Transaction ID : SA11Ai-CN523

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Andrew Billings Craig Iii

Mailing Address 809 Wyndemere Way

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2012

Transaction ID : SA11Ai-CN480

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Scott E Crater

Mailing Address 1106 Captains Walk St

City Sanibel State FL Zip Code 33957

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN738

Amount of Each Receipt this Period
200

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Richard K Crawford

Mailing Address 15890 Shadow Run Ct

City Fort Myers	State FL	Zip Code 33912
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN732

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Jay Crouse

Mailing Address 3308 Higel Avenue

City Sarasota	State FL	Zip Code 34242
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11Ai-CN668

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Karen J Crowther

Mailing Address 15170 Cannongate Dr

City Fort Myers	State FL	Zip Code 33912
--------------------	-------------	-------------------

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

Name of Employer Colliers	Occupation Real Estate
------------------------------	---------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2012

Transaction ID : SA11Ai-CN527

Amount of Each Receipt this Period
250

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Dave Dalesio

Mailing Address 8741 Wesleyan Dr
#1423

City Fort Myers State FL Zip Code 33919

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

Name of Employer Fort Myers Eye Associates PA Occupation Optometrist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 21 / 2012

Transaction ID : SA11Ai-CN545

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Myra Janco Daniels

Mailing Address 721 Teal Ct

City Naples State FL Zip Code 34108

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 18 / 2012

Transaction ID : SA11Ai-CN534

Amount of Each Receipt this Period
500

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

Mailing Address 8661 Corkscrew Rd

City Estero State FL Zip Code 33928

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

Name of Employer College Of Life Foundation Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : SA11Ai-CN744

Amount of Each Receipt this Period
250

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Daniel Bryon Delisi

Mailing Address 4936 Royal Palm Dr

City Estero State FL Zip Code 33928

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

Name of Employer DeLisi Fitzgerald Occupation Planner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN611

Amount of Each Receipt this Period
500

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

Mailing Address 980 E Gulf Dr

City Sanibel State FL Zip Code 33957

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

Name of Employer None Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN740

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Gaither B Deluca

Mailing Address 980 E Gulf Dr

City Sanibel State FL Zip Code 33957

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

Name of Employer None Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN741

Amount of Each Receipt this Period
150

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Grant Dewey

Mailing Address 1 Prescott Lane

City Greenwich State CT Zip Code 06830

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

Name of Employer Citigroup Occupation Finance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11Ai-CN405

Amount of Each Receipt this Period
500

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

Mailing Address 158 Phelps rd

City Ridgewood State NJ Zip Code 07450

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

Name of Employer Canaccord Genuity Occupation Salesman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11Ai-CN404

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Paul S Doherty

Mailing Address 81 Gilbert Rd.

City Ho Ho Kus State NJ Zip Code 07423

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

Name of Employer Arrowpac Inc. Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012

Transaction ID : SA11Ai-CN431

Amount of Each Receipt this Period
2500

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 26 OF 132
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Paul S Doherty III

Mailing Address 74 Edgewood Drive

City State Zip Code
Ho Ho Kus NJ 07423

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN437

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Reynolds Du Pont Jr

Mailing Address P.O. Drawer J

City State Zip Code
Fishers Island NY 06390

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

Name of Employer Occupation
Pirates Cove Marine Inc. President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 11 / 2012

Transaction ID : SA11Ai-CN687

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Gena Milena Eddy

Mailing Address 5546 Shaddelee Ln W

City State Zip Code
Fort Myers FL 33919

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

Name of Employer Occupation
Student Student

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11Ai-CN857

Amount of Each Receipt this Period
1000

In-Kind Received Food

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Michele E Eddy		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2012	
Mailing Address 5546 Shaddelee Ln W		Transaction ID : SA11Ai-CN856	
City Fort Myers	State FL	Zip Code 33919	Amount of Each Receipt this Period _____ 2235.93
FEC ID number of contributing federal political committee. C _____			
Name of Employer Homemaker	Occupation Homemaker		In-Kind Received Food & decorations
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2235.93		

Full Name (Last, First, Middle Initial) B. Charles B Edwards		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2012	
Mailing Address 15831 Turnbridge Ct		Transaction ID : SA11Ai-CN605	
City Fort Myers	State FL	Zip Code 33908	Amount of Each Receipt this Period _____ 250
FEC ID number of contributing federal political committee. C _____			
Name of Employer Geraghty Dougherty And Edwards	Occupation Attorney		In-Kind Received Food & decorations
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250		

Full Name (Last, First, Middle Initial) C. Suzanne H Edwards		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2012	
Mailing Address 15831 Turnbridge Ct		Transaction ID : SA11Ai-CN606	
City Fort Myers	State FL	Zip Code 33908	Amount of Each Receipt this Period _____ 250
FEC ID number of contributing federal political committee. C _____			
Name of Employer Homemaker	Occupation Homemaker		In-Kind Received Food & decorations
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250		

SUBTOTAL of Receipts This Page (optional).....	_____ 2735.93
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: (check only one)	PAGE 28 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Susan D Evans

Mailing Address 3924 Upolo Ln

City Naples State FL Zip Code 34119

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

Name of Employer Self Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : SA11Ai-CN409

Amount of Each Receipt this Period
250

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

Mailing Address 228 Carleon Ave.

City Larchmont State NY Zip Code 10538

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

Name of Employer Canaccord Genuity Occupation Sales

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11Ai-CN406

Amount of Each Receipt this Period
500

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

Mailing Address 21 Guinea Road

City Greenwich State CT Zip Code 06830

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

Name of Employer Chilton Investment Company Occupation EVP

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11Ai-CN398

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 29 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Jon K Finstrom

Mailing Address 1323 Gasparilla Dr

City State Zip Code
Fort Myers FL 33901

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

Name of Employer Occupation
Florida Marina Clubs LLC President/CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1431.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2012

Transaction ID : SA11Ai-CN859

Amount of Each Receipt this Period
1431.29

In-Kind Received Food & beverage

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

Mailing Address 36 Crooked Mile Road

City State Zip Code
Darien CT 06820

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

Name of Employer Occupation
Chilton Investment Company Director Of Research

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN434

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Helen T Fraser

Mailing Address 1000 10th St

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 13 / 2012

Transaction ID : SA11Ai-CN699

Amount of Each Receipt this Period
2500

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

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

4931.29

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Richard M Fraser

Mailing Address 1000 10th St

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 13 / 2012

Transaction ID : SA11Ai-CN700

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Mr. Donald H. Freimark

Mailing Address 6 Old Cranberry Road

City Sloatsburg State NY Zip Code 10974

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

Name of Employer Transnational Research Occupation Financial Services

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11Ai-CN485

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Ms. Joan Galvan

Mailing Address P.O. Box 8337

City Longboat Key State FL Zip Code 34228

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

Name of Employer Kelley Drye & Warren LLP Occupation Government Relations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN659

Amount of Each Receipt this Period
250

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 31 OF 132
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Joseph Danald Gammons

Mailing Address 8796 Ventura Way

City Naples State FL Zip Code 34109

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

Name of Employer Office Furniture & Design Concepts Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN777

Amount of Each Receipt this Period
250

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

Mailing Address P. O. Box 726

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : SA11Ai-CN552

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Lavern Norris Gaynor

Mailing Address 266 15th Ave S

City Naples State FL Zip Code 34102

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2012

Transaction ID : SA11Ai-CN499

Amount of Each Receipt this Period
1000

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Robert A Geddes

Mailing Address Unknown

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2012

Transaction ID : SA11Ai-CN863

Amount of Each Receipt this Period
 250

B. Full Name (Last, First, Middle Initial)
Henry W Ghriskey Jr

Mailing Address 1624 Treasure Ln

City State Zip Code
 Boca Grande FL 33921

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

Name of Employer Occupation
 First Republic Investment

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012

Transaction ID : SA11Ai-CN670

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Giobbe

Mailing Address 666 Greenwich Street Apt PH7

City State Zip Code
 New York NY 10014

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

Name of Employer Occupation
 Barclay Capital Finance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11Ai-CN460

Amount of Each Receipt this Period
 250

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Marion M Gogolak

Mailing Address 824 Rue De Ville

City Naples State FL Zip Code 34108

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2012

Transaction ID : SA11Ai-CN516

Amount of Each Receipt this Period
250

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

Mailing Address 1401 LaBelle Avenue

City Towson State MD Zip Code 21204

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

Name of Employer Self Occupation Landscape Architect

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN816

Amount of Each Receipt this Period
2500

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

Mailing Address 2830 Broderick St

City San Francisco State CA Zip Code 94123

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

Name of Employer San Francisco Police Occupation Police Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 18 / 2012

Transaction ID : SA11Ai-CN519

Amount of Each Receipt this Period
100

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Richard Goss

Mailing Address 2830 Broderick St

City San Francisco State CA Zip Code 94123

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

Name of Employer San Francisco Police Occupation Police Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012

Transaction ID : SA11Ai-CN771

Amount of Each Receipt this Period
100

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

Mailing Address 1401 LaBelle Avenue

City Towson State MD Zip Code 21204

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : SA11Ai-CN815

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Ms. Judy Graham

Mailing Address 1698 Hillview Street

City Sarasota State FL Zip Code 34239

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

Name of Employer Graham Interiors Occupation Interior Designer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN662

Amount of Each Receipt this Period
250

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Greco

Mailing Address 3866 Torrey Pines Way

City Sarasota State FL Zip Code 34238

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

Name of Employer Libby's Occupation Restauranter

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN663

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Carole A Green

Mailing Address 5260 S Landings Dr
Unit #1601

City Fort Myers State FL Zip Code 33919

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

Name of Employer Capitol Strategies Consulting Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2012

Transaction ID : SA11Ai-CN853

Amount of Each Receipt this Period
250

In-Kind Received Food

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

Mailing Address P.O. Box 98

City Rapidan State VA Zip Code 22733

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

Name of Employer Self Occupation Investment Management

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11Ai-CN836

Amount of Each Receipt this Period
250

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Harry Gruner

Mailing Address 30 Winding Way

City: Verona State: PA Zip Code: 15147

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 06 / 11 / 2012

Transaction ID : SA11Ai-CN714

Amount of Each Receipt this Period: 500

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

Mailing Address 10721 Stevenson Road

City: Stevenson State: MD Zip Code: 21153

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

Name of Employer: Harry S. Gruner Occupation: Venture Capital

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500

Date of Receipt: 06 / 28 / 2012

Transaction ID : SA11Ai-CN846

Amount of Each Receipt this Period: 2500

C. Full Name (Last, First, Middle Initial)
Mrs. Nancy Gruner

Mailing Address 30 Winding Way

City: Verona State: PA Zip Code: 15147

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 500

Date of Receipt: 06 / 11 / 2012

Transaction ID : SA11Ai-CN713

Amount of Each Receipt this Period: 500

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Rebecca Gruner

Mailing Address 10721 Stevenson Rd.

City Stevenson State MD Zip Code 21153

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 28 / 2012

Transaction ID : SA11Ai-CN847

Amount of Each Receipt this Period
2500

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

Mailing Address 45 62nd St E
Apt 6A

City New York State NY Zip Code 10065

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

Name of Employer Chilton Investment Co. Occupation Investment Research Analyst

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11Ai-CN407

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
August W Hager Iii

Mailing Address 146 1st St E

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11Ai-CN680

Amount of Each Receipt this Period
250

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

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

Mailing Address 146 1st St E

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11Ai-CN679

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Jim Dudley Hall

Mailing Address 1004 Bayview Dr

City Sanibel State FL Zip Code 33957

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

Name of Employer Self Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN751

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Markus Bjorn Hammarberg

Mailing Address 169 Southwinds Dr

City Sanibel State FL Zip Code 33957

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

Name of Employer Stockholm Design Occupation Advertising

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN842

Amount of Each Receipt this Period
250

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 39 OF 132
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Elise A Hanley

Mailing Address 1632 Treasure Ln

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11Ai-CN564

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
W. A. Hanley

Mailing Address P. O. Box 1123

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11Ai-CN563

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
W. A. Hanley

Mailing Address P. O. Box 1123

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
550

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2012

Transaction ID : SA11Ai-CN805

Amount of Each Receipt this Period
100

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Albert D Hanser

Mailing Address 1517 Sand Castle Rd

City Sanibel State FL Zip Code 33957

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

Name of Employer Sanibel Captiva Trust Company Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : SA11Ai-CN472

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Carol W Harrington

Mailing Address 4021 40th St

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN676

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Roby Harrington Iii

Mailing Address 4021 40th St

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN675

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Joseph H Head Jr

Mailing Address P.O. Box 1263

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 07 / 2012

Transaction ID : SA11Ai-CN689

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Christopher Wayne Heidrick

Mailing Address 779 Pyrula Ave

City Sanibel State FL Zip Code 33957

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

Name of Employer Self Occupation Insurance

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN734

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Randy Paul Henderson Jr

Mailing Address 1314 Shadow Ln

City Fort Myers State FL Zip Code 33901

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

Name of Employer Corbin Henderson Occupation Real Estate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN633

Amount of Each Receipt this Period
500

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Brigitte Henning

Mailing Address 7389 Heritage Palms Estate Drive

City Fort Myers State FL Zip Code 33966

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

Name of Employer Self Occupation Financial Services

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SA11Ai-CN571

Amount of Each Receipt this Period
250

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

Mailing Address P. O. Box 608

City Boca Grande State FL Zip Code 33921

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11Ai-CN748

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Earl G Hodges

Mailing Address 2140 Coach House Ln

City Naples State FL Zip Code 34105

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 23 / 2012

Transaction ID : SA11Ai-CN566

Amount of Each Receipt this Period
500

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Clayton Hollis

Mailing Address 1385 Jefferson Drive

City Lakeland	State FL	Zip Code 33803
------------------	-------------	-------------------

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

Name of Employer Publix Super Markets Inc.	Occupation Vice President Public Affairs
---	---

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN808

Amount of Each Receipt this Period
250

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

Mailing Address 232 22nd St W

City New York	State NY	Zip Code 10011
------------------	-------------	-------------------

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

Name of Employer Chilton Private Clients	Occupation Chief Investment Officer
---	--

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11Ai-CN402

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Alan M Horton

Mailing Address 7023 Greentree Dr

City Naples	State FL	Zip Code 34108
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : SA11Ai-CN410

Amount of Each Receipt this Period
500

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Alan M Horton		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2012
Mailing Address 7023 Greentree Dr		Transaction ID : SA11Ai-CN596
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) B. Mr. Roger L Howe		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address 4551 Shore Lane Box 9		Transaction ID : SA11Ai-CN669
City Boca Grande	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350	

Full Name (Last, First, Middle Initial) C. Tramm Hudson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 06 / 2012
Mailing Address 988 Boulevard of the Arts #1814		Transaction ID : SA11Ai-CN667
City Sarasota	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Stearns Bank	Occupation Banker	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 45 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Tramm Hudson

Mailing Address 988 Boulevard of the Arts #1814

City Sarasota State FL Zip Code 34236

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

Name of Employer Stearns Bank Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1025**

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

Transaction ID : SA11Ai-CN860

Amount of Each Receipt this Period
 525

In-Kind Received Food

B. Full Name (Last, First, Middle Initial)
Brian W Hummel

Mailing Address 16448 Rainbow Meadows Ct

City Fort Myers State FL Zip Code 33908

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

Name of Employer GulfCoasat Cardiothoracic Surgeons Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2012

Transaction ID : SA11Ai-CN579

Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Brian W Hummel

Mailing Address 16448 Rainbow Meadows Ct

City Fort Myers State FL Zip Code 33908

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

Name of Employer GulfCoasat Cardiothoracic Surgeons Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN725

Amount of Each Receipt this Period
 500

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

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

1525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Harlan Wendell Hummel

Mailing Address 11125 Laughton Cir

City State Zip Code
Fort Myers FL 33913

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

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

Transaction ID : SA11Ai-CN774

Amount of Each Receipt this Period
250

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

Mailing Address 12881 Waterford Cir

City State Zip Code
Fort Myers FL 33919

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN601

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Nancy L Humphrey

Mailing Address 1657 Menlo Rd

City State Zip Code
Fort Myers FL 33901

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN610

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 47 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Andrew P Ireland		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2012
Mailing Address 151 1st St E		Transaction ID : SA11Ai-CN801
City Boca Grande	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700	

Full Name (Last, First, Middle Initial) B. Carlton Jackson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 701 I Street SE #603		Transaction ID : SA11Ai-CN828
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer US House Of Representatives	Occupation Congressional Aide	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) C. Paul Jenkel		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 18 / 2012
Mailing Address 105 Marcourt Dr		Transaction ID : SA11Ai-CN419
City Chappaqua	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800	

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 48 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Kimberly Leach Johnson		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2012	
Mailing Address 945 Barcarmil Way		Transaction ID : SA11Ai-CN632	
City Naples	State FL	Zip Code 34110	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Quarles & Brady	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) B. Michael J Katin		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2012	
Mailing Address 9150 Penzance Blvd		Transaction ID : SA11Ai-CN599	
City Fort Myers	State FL	Zip Code 33912	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500	
Name of Employer 21st Century Oncology	Occupation Physician		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500		

Full Name (Last, First, Middle Initial) C. Jennifer Keaton		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2012	
Mailing Address 132 Lakeshore Drive		Transaction ID : SA11Ai-CN617	
City Marietta	State GA	Zip Code 30067	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer One Mediation	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Walter Keenan

Mailing Address 1000 Mason Street. Apt. 801

City San Francisco State CA Zip Code 94108

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

Name of Employer Occupation
Walter C. Keenan Investments

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : SA11Ai-CN770

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Maurice D Kent

Mailing Address 4160 Cutlass Ln

City Naples State FL Zip Code 34102

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

Name of Employer Occupation
Self Employed Self Employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : SA11Ai-CN692

Amount of Each Receipt this Period
1000

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

Mailing Address 2343 Wulfert Road

City Sanibel State FL Zip Code 33957

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300

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

Transaction ID : SA11Ai-CN778

Amount of Each Receipt this Period
100

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Henry King

Mailing Address 115 East 67th Street

City State Zip Code
New York NY 10065

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
06 / 11 / 2012

Transaction ID : SA11Ai-CN706

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Alan R Korest

Mailing Address 3377 Gulf Shore Blvd N
Apt 1c

City State Zip Code
Naples FL 34103

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 17 / 2012

Transaction ID : SA11Ai-CN535

Amount of Each Receipt this Period
1000

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

Mailing Address 375 Park Avenue

City State Zip Code
New York NY 10152

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

Name of Employer Occupation
Invemed Associates Chairman/President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt
 M M / D D / Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11Ai-CN474

Amount of Each Receipt this Period
600

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

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

Mailing Address P. O. Box 323

City Aiken State SC Zip Code 29802

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

Name of Employer Eagle Aviation Inc. Occupation Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2012

Transaction ID : SA11Ai-CN532

Amount of Each Receipt this Period
2500

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

Mailing Address 2025 Anza Street

City San Francisco State CA Zip Code 94118

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

Name of Employer Aravo Solutions Occupation Software Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA11Ai-CN696

Amount of Each Receipt this Period
250

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

Mailing Address 4000 S. Ocean Blvd. #209

City Palm Beach State FL Zip Code 33480

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

Name of Employer Chilton Trust Company Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2012

Transaction ID : SA11Ai-CN395

Amount of Each Receipt this Period
250

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Cindy Lignelli

Mailing Address P.O. Box 296

City State Zip Code
Bokeelia FL 33922

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
375

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

Transaction ID : SA11Ai-CN848

Amount of Each Receipt this Period
250

In-Kind Received Food

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

Mailing Address P.O. Box 296

City State Zip Code
Bokeelia FL 33922

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
425

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

Transaction ID : SA11Ai-CN494

Amount of Each Receipt this Period
50

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

Mailing Address P.O. Box 296

City State Zip Code
Bokeelia FL 33922

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
450

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

Transaction ID : SA11Ai-CN781

Amount of Each Receipt this Period
25

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. A Scott Logan		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2012
Mailing Address 984 Oyster Ct		Transaction ID : SA11Ai-CN720
City Sanibel	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) B. David Lucas		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 06 / 2012
Mailing Address 13141 Ponderosa Way		Transaction ID : SA11Ai-CN381
City Fort Myers	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Bonita Bay Group	Occupation Developer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) C. John T Mackelfresh		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 11 / 2012
Mailing Address 231 Bentley Dr		Transaction ID : SA11Ai-CN518
City Naples	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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: (check only one)	PAGE 54 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

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

Mailing Address 1427 Sandpiper Cir

City Sanibel State FL Zip Code 33957

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN724

Amount of Each Receipt this Period
500

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

Mailing Address 158 Stamford Ave

City Stamford State CT Zip Code 06902

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

Name of Employer Chilton Investment Group Occupation Trader

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN438

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Ann Marie Marinaccio

Mailing Address 20818 Parkstone Terrace

City Bradenton State FL Zip Code 34202

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

Name of Employer MGA Insurance Occupation Accountant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : SA11Ai-CN661

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Colvin Matheson
Full Name (Last, First, Middle Initial)
Mailing Address 4745 34th Road North

City Arlington	State VA	Zip Code 22207
-------------------	-------------	-------------------

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

Name of Employer Matheson Financial Advisors	Occupation Consultant
---	--------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2012

Transaction ID : SA11Ai-CN488

Amount of Each Receipt this Period
250

B. Mary Ellen Matheson
Full Name (Last, First, Middle Initial)
Mailing Address 4745 34th Road North

City Arlington	State VA	Zip Code 22207
-------------------	-------------	-------------------

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

Name of Employer Matheson Financial Advisors	Occupation Administrator
---	-----------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2012

Transaction ID : SA11Ai-CN489

Amount of Each Receipt this Period
250

C. Tina McCain Matte
Full Name (Last, First, Middle Initial)
Mailing Address 9051 Pittsburgh Blvd

City Fort Myers	State FL	Zip Code 33967
--------------------	-------------	-------------------

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

Name of Employer Gravina Smith Matte & Arnold	Occupation Business Owner
--	------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2012

Transaction ID : SA11Ai-CN400

Amount of Each Receipt this Period
1000

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Tina McCain Matte

Mailing Address 9051 Pittsburgh Blvd

City Fort Myers State FL Zip Code 33967

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

Name of Employer Gravina Smith Matte & Arnold Occupation Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11Ai-CN826

Amount of Each Receipt this Period
1500

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

Mailing Address 11098 Sierra Palm Ct

City Fort Myers State FL Zip Code 33966

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2012

Transaction ID : SA11Ai-CN798

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Edward Mc Namara

Mailing Address 6620 George Washington Way

City Naples State FL Zip Code 34108

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

Name of Employer Coastal Beverage Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : SA11Ai-CN412

Amount of Each Receipt this Period
2500

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) John D. McCabe		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2012
Mailing Address 2688 Coconut Dr		Transaction ID : SA11Ai-CN832
City Sanibel	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer EPMGPC	Occupation Physician	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) Mr. Henry McCance		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 29 / 2012
Mailing Address P.O. Box 832		Transaction ID : SA11Ai-CN490
City Lake Wales	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) Chris McCarthy		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012
Mailing Address 271 Orchard Place		Transaction ID : SA11Ai-CN463
City Ridgewood	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer RBC	Occupation Finance	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

SUBTOTAL of Receipts This Page (optional).....	1750.00
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: (check only one)	PAGE 58 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Gerard A McHale Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 7146 Estero Blvd
 Unit #211
 City Fort Myers Beach State FL Zip Code 33931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McHale P.A. Occupation CPA
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012
Transaction ID : SA11Ai-CN651
 Amount of Each Receipt this Period
 1000

B. Terry P McMahan
 Full Name (Last, First, Middle Initial)
 Mailing Address 4393 Bittern Ct
 City Naples State FL Zip Code 34119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hodges University Occupation President
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012
Transaction ID : SA11Ai-CN629
 Amount of Each Receipt this Period
 500

C. Marjorie J Meek
 Full Name (Last, First, Middle Initial)
 Mailing Address 712 Gopher Walk Way
 City Sanibel State FL Zip Code 33957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rosier Insurance Occupation Insurance Agent
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2012
Transaction ID : SA11Ai-CN503
 Amount of Each Receipt this Period
 500

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
John Mettler

Mailing Address 220 72nd St E
Apt 15e

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN435

Amount of Each Receipt this Period
1000

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

Mailing Address 43225 State Road 64 East

City State Zip Code
Myakka City FL 34251

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

Name of Employer Occupation
Retired retired Congressman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 08 / 2012

Transaction ID : SA11Ai-CN386

Amount of Each Receipt this Period
1000

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

Mailing Address 43225 State Road 64 East

City State Zip Code
Myakka City FL 34251

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

Name of Employer Occupation
Retired retired Congressman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : SA11Ai-CN655

Amount of Each Receipt this Period
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Daniel Miller

Mailing Address 114 N. Edgewood Street

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 28 / 2012

Transaction ID : SA11Ai-CN476

Amount of Each Receipt this Period
750

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

Mailing Address 1600 1st Ave W
Unit 502-3

City State Zip Code
Bradenton FL 34205

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11Ai-CN396

Amount of Each Receipt this Period
1000

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

Mailing Address 43 Tidy Island Blvd.

City State Zip Code
Bradenton FL 34210

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 08 / 2012

Transaction ID : SA11Ai-CN385

Amount of Each Receipt this Period
500

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Marilyn W Miller

Mailing Address 2161 Lochmoor Cir

City North Fort Myers State FL Zip Code 33903

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

Name of Employer Fowler White Boggs Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN869

Amount of Each Receipt this Period
500

In-Kind Received food

B. Full Name (Last, First, Middle Initial)
Mavis S Miller

Mailing Address 1299 Plumosa Dr

City Fort Myers State FL Zip Code 33901

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN612

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Raymond Wesley Miller

Mailing Address 313 Turtle Hatch Rd

City Naples State FL Zip Code 34103

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012

Transaction ID : SA11Ai-CN443

Amount of Each Receipt this Period
300

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
T. Wainwright Miller Jr

Mailing Address 1299 Plumosa Dr

City State Zip Code
Fort Myers FL 33901

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 07 / 2012

Transaction ID : SA11Ai-CN495

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
T. Wainwright Miller Jr

Mailing Address 1299 Plumosa Dr

City State Zip Code
Fort Myers FL 33901

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN613

Amount of Each Receipt this Period
2000

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

Mailing Address 1507 Cordova Ave

City State Zip Code
Fort Myers FL 33901

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

Name of Employer Occupation
Self Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN729

Amount of Each Receipt this Period
250

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Khosrow Moaveni		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 19 / 2012
Mailing Address 4351 Gulf Shore Blvd N Apt 15n City State Zip Code Naples FL 34103		Transaction ID : SA11Ai-CN444
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer FMDC	Occupation Business	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) B. Khosrow Moaveni		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2012
Mailing Address 4351 Gulf Shore Blvd N Apt 15n City State Zip Code Naples FL 34103		Transaction ID : SA11Ai-CN864
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer FMDC	Occupation Business	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	In-Kind Received food

Full Name (Last, First, Middle Initial) C. Richard D Molloy		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 727 9th Ave S City State Zip Code Naples FL 34102		Transaction ID : SA11Ai-CN600
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Florida Gulfshore Capital	Occupation Venture Capital Investments	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Neale Montgomery

Mailing Address 6650 Penzance Blvd

City Fort Myers State FL Zip Code 33966

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

Name of Employer Pavese Law Firm Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN602

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
John R Morse

Mailing Address 1159 Junonia St

City Sanibel State FL Zip Code 33957

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

Name of Employer LodgeWorks L.P. Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2012

Transaction ID : SA11Ai-CN492

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Mr. Edmund Morton III

Mailing Address 304 Beach Road

City Sarasota State FL Zip Code 34242

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

Name of Employer Morton's Gourmet Market Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN657

Amount of Each Receipt this Period
250

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Michelle Murray

Mailing Address 2032 Brentwood Road

City Northbrook State IL Zip Code 60062

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN785

Amount of Each Receipt this Period
250

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

Mailing Address 2032 Brentwood Road

City Northbrook State IL Zip Code 60062

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

Name of Employer Verizon Wireless Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN784

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Peter M Nicholas

Mailing Address One Joy Street

City Boston State MA Zip Code 02108

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

Name of Employer Boston Scientific Occupation Healthcare

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11Ai-CN844

Amount of Each Receipt this Period
500

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Ms. Ruth L Nicholas

Mailing Address **One Joy Street**

City **Boston** State **MA** Zip Code **02108**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2012

Transaction ID : SA11Ai-CN845

Amount of Each Receipt this Period
900

B. Full Name (Last, First, Middle Initial)
Kenneth M Nirenberg

Mailing Address **15981 Nelsons Ct**

City **Fort Myers** State **FL** Zip Code **33908**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 19 / 2012

Transaction ID : SA11Ai-CN704

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Kevin J. O'Brien

Mailing Address **613 Silvermine Rd**

City **New Canaan** State **CT** Zip Code **06840**

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : SA11Ai-CN420

Amount of Each Receipt this Period
250

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Susan O'Brien

Mailing Address 613 Silvermine Rd

City State Zip Code
New Canaan CT 06840

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2012

Transaction ID : SA11Ai-CN421

Amount of Each Receipt this Period
250

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

Mailing Address 597 Weed Street

City State Zip Code
New Canaan CT 06840

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

Name of Employer Occupation
Rothschild Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11Ai-CN448

Amount of Each Receipt this Period
250

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

Mailing Address 4 Palm Trail

City State Zip Code
Hobe Sound FL 33455

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

Name of Employer Occupation
Parsons Capital Investments

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 13 / 2012

Transaction ID : SA11Ai-CN715

Amount of Each Receipt this Period
500

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

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

Mailing Address 1429 Causey Ct

City Sanibel State FL Zip Code 33957

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

Name of Employer The Damex Corporation Occupation Contractor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2012

Transaction ID : SA11Ai-CN546

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Thomas R Peek

Mailing Address 90 East Ave

City Naples State FL Zip Code 34108

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

Name of Employer Retired Occupation Civil Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2012

Transaction ID : SA11Ai-CN416

Amount of Each Receipt this Period
500

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

Mailing Address 5689 Shaddelee Ln W

City Fort Myers State FL Zip Code 33919

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

Name of Employer Self-employed Occupation Home Remodeler

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012

Transaction ID : SA11Ai-CN428

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 69 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Fred Pezeshkan

Mailing Address 3725 Fort Charles Dr

City State Zip Code
Naples FL 34102

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

Name of Employer Occupation
Manhattan Construction Construction

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 08 / 2012

Transaction ID : SA11Ai-CN466

Amount of Each Receipt this Period
1000

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

Mailing Address 3725 Fort Charles Dr

City State Zip Code
Naples FL 34102

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

Name of Employer Occupation
Manhattan Construction Construction

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2148.91

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 18 / 2012

Transaction ID : SA11Ai-CN855

Amount of Each Receipt this Period
1148.91

In-Kind Received Food

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

Mailing Address 3581 Shore Lane-2007

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : SA11Ai-CN375

Amount of Each Receipt this Period
1000

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

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

3148.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Donald Quest

Mailing Address 200 E. 69th Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Hospital Neurosurgeon

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 19 / 2012

Transaction ID : SA11Ai-CN445

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Brian Christopher Rafalski

Mailing Address 4709 Rue Belle Mer

City State Zip Code
Sanibel FL 33957

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 06 / 2012

Transaction ID : SA11Ai-CN379

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Nathaniel Reed

Mailing Address P.O. Box 1213

City State Zip Code
Hobe Sound FL 33475

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2012

Transaction ID : SA11Ai-CN786

Amount of Each Receipt this Period
1000

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

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

Mailing Address 665 Boca Bay Dr

City Boca Grande	State FL	Zip Code 33921
---------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Architect Retired
-----------------------------	---------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		06		2012

Transaction ID : SA11Ai-CN376

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Nora Lea Reefer

Mailing Address 665 Boca Bay Dr

City Boca Grande	State FL	Zip Code 33921
---------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		06		2012

Transaction ID : SA11Ai-CN377

Amount of Each Receipt this Period
250

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

Mailing Address 3525 Gordon Dr

City Naples	State FL	Zip Code 34102
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FEC ID number of contributing federal political committee. **C**

Name of Employer A. Vernon Allen Builder	Occupation Construction
---	----------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		19		2012

Transaction ID : SA11Ai-CN597

Amount of Each Receipt this Period
250

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Edward Oneil Ridlehoover

Mailing Address 4547 Buck Key Rd

City Sanibel	State FL	Zip Code 33957
-----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN749

Amount of Each Receipt this Period
125

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

Mailing Address 1620 Little Raven Street Unit 305

City Denver	State CO	Zip Code 80202
----------------	-------------	-------------------

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

Name of Employer Proprietary Capital	Occupation Finance
---	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 11 / 2012

Transaction ID : SA11Ai-CN509

Amount of Each Receipt this Period
250

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

Mailing Address 18 Dellwood Pkwy S

City Madison	State NJ	Zip Code 07940
-----------------	-------------	-------------------

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

Name of Employer Jefferson	Occupation Finance
-------------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN436

Amount of Each Receipt this Period
1000

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

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

1375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Geoffrey W Roepstorff

Mailing Address 1287 Isabel Dr

City Sanibel State FL Zip Code 33957

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

Name of Employer Edison National Bank Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN453

Amount of Each Receipt this Period
250

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

Mailing Address 1287 Isabel Dr

City Sanibel State FL Zip Code 33957

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

Name of Employer Edison National Bank Occupation Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN454

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Mr. Larry Ross

Mailing Address P.O. Box 525

City Manchester State VT Zip Code 05254

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

Name of Employer Ross & Company Occupation Executive Recruiting

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : SA11Ai-CN835

Amount of Each Receipt this Period
1000

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Doreen M Ruane

Mailing Address 815 Birdie View Pt

City Sanibel State FL Zip Code 33957

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

Name of Employer Castleton Capital Occupation Vice President Operations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11Ai-CN795

Amount of Each Receipt this Period
1000

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

Mailing Address 815 Birdie View Pt

City Sanibel State FL Zip Code 33957

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

Name of Employer Castleton Capital Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11Ai-CN794

Amount of Each Receipt this Period
1000

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

Mailing Address 1300 Shadow Ln

City Fort Myers State FL Zip Code 33901

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2012

Transaction ID : SA11Ai-CN621

Amount of Each Receipt this Period
500

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Christopher Sanger

Mailing Address 51 East 90th Street

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Christie's Vice President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2012

Transaction ID : SA11Ai-CN521

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. David Schlageter

Mailing Address 76 Woodland Road

City State Zip Code
Maplewood NJ 07040

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

Name of Employer Occupation
Morgan Stanley Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2012

Transaction ID : SA11Ai-CN470

Amount of Each Receipt this Period
500

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

Mailing Address 801 Nelsons Walk

City State Zip Code
Naples FL 34102

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

Name of Employer Occupation
HMA Inc Chairman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2012

Transaction ID : SA11Ai-CN705

Amount of Each Receipt this Period
500

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mr. Stephen Seidensticker

Mailing Address 1917 South Osprey

City Sarasota State FL Zip Code 34236

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

Name of Employer Libby's Cafe & Bar Occupation Restaurant Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN666

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mr. Howard Seider

Mailing Address 5904 Riverview Lane

City Bradenton State FL Zip Code 34209

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : SA11Ai-CN664

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Kathleen Elinor Shimp

Mailing Address 822 Cypress Lake Cir

City Fort Myers State FL Zip Code 33919

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

Name of Employer None Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA11Ai-CN496

Amount of Each Receipt this Period
125

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Steven Carl Shimp

Mailing Address 822 Cypress Lake Cir

City Fort Myers State FL Zip Code 33919

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

Name of Employer Shimp Services Occupation Engineer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012

Transaction ID : SA11Ai-CN497

Amount of Each Receipt this Period
 125

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

Mailing Address 7894 Sandel Wood Cir W

City Fort Myers State FL Zip Code 33908

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012

Transaction ID : SA11Ai-CN792

Amount of Each Receipt this Period
 250

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

Mailing Address 15460 Catalpa Cove Ln

City Fort Myers State FL Zip Code 33908

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

Name of Employer Finemark Bank Occupation Financial Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11Ai-CN565

Amount of Each Receipt this Period
 250

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Marilyn Elizabeth Smith

Mailing Address 2460 Mcgregor Blvd

City Fort Myers	State FL	Zip Code 33901
--------------------	-------------	-------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11Ai-CN818

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Milissa Bradley Sprecher

Mailing Address 4702 Rue Belle Mer

City Sanibel	State FL	Zip Code 33957
-----------------	-------------	-------------------

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

Name of Employer Noise Inc.	Occupation CEO
--------------------------------	-------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN731

Amount of Each Receipt this Period
250

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

Mailing Address 2935 Bellflower Ln

City Naples	State FL	Zip Code 34105
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2012

Transaction ID : SA11Ai-CN536

Amount of Each Receipt this Period
1000

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Bayne Stevenson

Mailing Address 3531 Shore Ln

City: Boca Grande State: FL Zip Code: 33921

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: **06 / 04 / 2012**

Transaction ID : SA11Ai-CN690

Amount of Each Receipt this Period: **500**

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

Mailing Address 3531 Shore Ln

City: Boca Grande State: FL Zip Code: 33921

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **2500**

Date of Receipt: **06 / 29 / 2012**

Transaction ID : SA11Ai-CN823

Amount of Each Receipt this Period: **1500**

C. Full Name (Last, First, Middle Initial)
Jean B Stevenson

Mailing Address 3531 Shore Ln

City: Boca Grande State: FL Zip Code: 33921

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: **500**

Date of Receipt: **06 / 04 / 2012**

Transaction ID : SA11Ai-CN691

Amount of Each Receipt this Period: **500**

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Sandra Lynn Kolar Stilwell

Mailing Address 18130 Old Pelican Bay Dr

City State Zip Code
Fort Myers Beach FL 33931

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

Name of Employer Occupation
Sunshine Grille Restaurateur

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2012

Transaction ID : SA11Ai-CN854

Amount of Each Receipt this Period
500

In-Kind Received Food

B. Full Name (Last, First, Middle Initial)
Marilyn M Stout

Mailing Address 2907 SW 29th Ave

City State Zip Code
Cape Coral FL 33914

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
253.15

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SA11Ai-CN858

Amount of Each Receipt this Period
203.15

In-Kind Received Food

C. Full Name (Last, First, Middle Initial)
Joseph F Sullivan

Mailing Address 375 Bowline Dr

City State Zip Code
Naples FL 34103

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

Name of Employer Occupation
Retired Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2012

Transaction ID : SA11Ai-CN500

Amount of Each Receipt this Period
250

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

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

953.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
W. Clarke Swanson

Mailing Address P.O. Box 148

City: Oakville State: CA Zip Code: 94562

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

Name of Employer: Swanson Vineyards Occupation: Vintner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 05 / 01 / 2012

Transaction ID : SA11Ai-CN471

Amount of Each Receipt this Period: 1000

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

Mailing Address 20 Woodmere Way

City: Pennington State: NJ Zip Code: 08534

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

Name of Employer: Chilton Investment Company Occupation: Investment Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000

Date of Receipt: 04 / 19 / 2012

Transaction ID : SA11Ai-CN427

Amount of Each Receipt this Period: 1000

C. Full Name (Last, First, Middle Initial)
Jon L Thompson

Mailing Address 4265 W Gulf Dr

City: Sanibel State: FL Zip Code: 33957

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000

Date of Receipt: 06 / 11 / 2012

Transaction ID : SA11Ai-CN686

Amount of Each Receipt this Period: 2000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Mary Tripp

Mailing Address 2914 N 24th Street

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
ABB Inc. Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : SA11Ai-CN765

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Mr. Timothy Lee Truesdell

Mailing Address 970 Cape Marco Dr
Apt 703

City State Zip Code
Marco Island FL 34145

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

Name of Employer Occupation
Self Investments

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2012

Transaction ID : SA11Ai-CN622

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Betty Lou Tucker

Mailing Address 4151 Gulf Shore Blvd N
Apt 405

City State Zip Code
Naples FL 34103

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11Ai-CN800

Amount of Each Receipt this Period
250

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Hope Hill Van Beuren

Mailing Address 1340 13th St

City State Zip Code
Boca Grande FL 33921

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2012

Transaction ID : SA11Ai-CN693

Amount of Each Receipt this Period
250

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

Mailing Address 24 Island Drive

City State Zip Code
Key Largo FL 33037

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 11 / 2012

Transaction ID : SA11Ai-CN707

Amount of Each Receipt this Period
250

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

Mailing Address 608 5th Ave
Apt 807

City State Zip Code
New York NY 10020

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

Name of Employer Occupation
Vartanian & Sons Jeweler

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11Ai-CN520

Amount of Each Receipt this Period
1000

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

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

Mailing Address 24 Island Drive

City State Zip Code
Key Largo FL 33037

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2012

Transaction ID : SA11Ai-CN708

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Kevin J Vertesch

Mailing Address 1056 S Yachtsman Dr

City State Zip Code
Sanibel FL 33957

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

Name of Employer Occupation
Self Builder

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
575

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN716

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Mr. Fay Vincent

Mailing Address 145 Sago Palm Road

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11Ai-CN455

Amount of Each Receipt this Period
1000

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Dolph W Von Arx

Mailing Address 3663 Rum Row

City Naples State FL Zip Code 34102

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : SA11Ai-CN533

Amount of Each Receipt this Period
500

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

Mailing Address 8 Longmeadow Drive

City Ipswich State MA Zip Code 01938

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

Name of Employer Brown Brother Harriman Occupation Financial Services

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11Ai-CN459

Amount of Each Receipt this Period
1000

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

Mailing Address 6505 Corpus Christi Drive

City Austin State TX Zip Code 78729

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012

Transaction ID : SA11Ai-CN688

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Natalie Weymouth

Mailing Address P.O. Box 31

City Montchanin State DE Zip Code 19710

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11Ai-CN486

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Phillip Weymouth Jr

Mailing Address P.O. Box 31

City Montchanin State DE Zip Code 19710

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

Name of Employer Weymouth Swayze & Corroon Occupation Risk Management Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11Ai-CN487

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Randy W White

Mailing Address 648 Lake Murex Cir

City Sanibel State FL Zip Code 33957

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

Name of Employer Self Employed Occupation Author

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : SA11Ai-CN861

Amount of Each Receipt this Period
500

In-Kind Received Food & beverage

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Randy W White

Mailing Address 648 Lake Murex Cir

City Sanibel State FL Zip Code 33957

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

Name of Employer Self Employed Occupation Author

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN736

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
John K Wiest

Mailing Address 4360 Horse Creek Blvd

City Fort Myers State FL Zip Code 33905

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

Name of Employer Price Waterhouse Coopers Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN609

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Kenneth M Wilkinson

Mailing Address 1920 Virginia Ave
Unit #1502

City Fort Myers State FL Zip Code 33901

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

Name of Employer Lee County Occupation Property Appraiser

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN620

Amount of Each Receipt this Period
250

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Kenneth M Wilkinson

Mailing Address 1920 Virginia Ave
Unit #1502

City Fort Myers State FL Zip Code 33901

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

Name of Employer Lee County Occupation Property Appraiser

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 21 / 2012

Transaction ID : SA11Ai-CN728

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Shelby Jean Willcox

Mailing Address 2011 Gulf Shore Blvd N

City Naples State FL Zip Code 34102

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2012

Transaction ID : SA11Ai-CN588

Amount of Each Receipt this Period
500

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

Mailing Address 1148 5th Avenue Apt. 7-B

City New York State NY Zip Code 10128

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

Name of Employer Chilton Investment Co. Occupation Investor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 19 / 2012

Transaction ID : SA11Ai-CN439

Amount of Each Receipt this Period
500

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: (check only one)	PAGE 89 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Ms. Shirley A Wood

Mailing Address 1400 SW 48th Ter

City Cape Coral State FL Zip Code 33914

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11Ai-CN870

Amount of Each Receipt this Period
 _____ **1000**

In-Kind Received Food & Beverage

B. Full Name (Last, First, Middle Initial)
Gregory K Wooley

Mailing Address 1400 SW 48th Ter

City Cape Coral State FL Zip Code 33914

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

Name of Employer Kitchen Cabaret Occupation President & CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2012

Transaction ID : SA11Ai-CN822

Amount of Each Receipt this Period
 _____ **250**

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

Mailing Address 1313 Melaleuca Ln

City Fort Myers State FL Zip Code 33901

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

Name of Employer Terry Wynter Auto Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2012

Transaction ID : SA11Ai-CN616

Amount of Each Receipt this Period
 _____ **500**

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

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

_____ **1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 132
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Elizabeth Michele Yovanovich

Mailing Address 556 Myrtle Rd

City Naples State FL Zip Code 34108

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

Name of Employer Florida Gulf Coast University Occupation Dean Of Students

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : SA11Ai-CN548

Amount of Each Receipt this Period
500

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

Mailing Address 556 Myrtle Rd

City Naples State FL Zip Code 34108

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

Name of Employer Coleman Yovanovich Koester Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : SA11Ai-CN547

Amount of Each Receipt this Period
500

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

158102.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 132
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial)
Suncoast Federal Political Action Committee

Mailing Address P.O. Box 1438

City Tampa State FL Zip Code 33601-1438

FEC ID number of contributing federal political committee. **C** C00230516

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA11C-CN701

Amount of Each Receipt this Period
 5000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Trail Blazer Campaign Services Inc.		Date of Disbursement MM / DD / YYYY 05 / 07 / 2012
Mailing Address 620 Mendelssohn Avenue N Suite 186		Amount of Each Disbursement this Period 50.00
City Minneapolis	State MN Zip Code 55427	
Purpose of Disbursement Merge e-mail addresses from i-contribute site	Category/Type 001	Transaction ID : SB17-EX169
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Merge e-mail addresses from i-contribute site
State: District:		

Full Name (Last, First, Middle Initial) B. Artype Inc.		Date of Disbursement MM / DD / YYYY 05 / 02 / 2012
Mailing Address 3530 Work Drive		Amount of Each Disbursement this Period 19.08
City Fort Myers	State FL Zip Code 33916	
Purpose of Disbursement Printing	Category/Type 001	Transaction ID : SB17-EX151
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Printing
State: District:		

Full Name (Last, First, Middle Initial) c. Sally Frizzell Coleman CPA P.A.		Date of Disbursement MM / DD / YYYY 04 / 02 / 2012
Mailing Address P.O. Box 2620		Amount of Each Disbursement this Period 2718.75
City Fort Myers	State FL Zip Code 33902	
Purpose of Disbursement accounting	Category/Type 001	Transaction ID : SB17-EX75
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	accounting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2787.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Sally Frizzell Coleman CPA P.A.			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012	
Mailing Address P.O. Box 2620			Amount of Each Disbursement this Period 1975.58	
City Fort Myers	State FL	Zip Code 33902	Transaction ID : SB17-EX168	
Purpose of Disbursement Accounting fee		Category/ Type 001	Accounting fee	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Sally Frizzell Coleman CPA P.A.			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012	
Mailing Address P.O. Box 2620			Amount of Each Disbursement this Period 2659.75	
City Fort Myers	State FL	Zip Code 33902	Transaction ID : SB17-EX201	
Purpose of Disbursement Accounting fees		Category/ Type 001	Accounting fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. The Tarrance Group Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012	
Mailing Address 201 North Union Suite 410			Amount of Each Disbursement this Period 9350.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB17-EX174	
Purpose of Disbursement Consulting		Category/ Type 001	Consulting	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	13985.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 132		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Bankcard CCD		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address 2105 First Street		Amount of Each Disbursement this Period 206.95 Transaction ID : SB17-EX225
City Fort Myers	State FL	
Zip Code 33901	Purpose of Disbursement credit card charges	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	State: District:	credit card charges

Full Name (Last, First, Middle Initial) B. Bankcard CCD		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 2105 First Street		Amount of Each Disbursement this Period 8.20 Transaction ID : SB17-EX226
City Fort Myers	State FL	
Zip Code 33901	Purpose of Disbursement credit card fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	State: District:	credit card fees

Full Name (Last, First, Middle Initial) c. Bankcard CCD		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 2105 First Street		Amount of Each Disbursement this Period 183.66 Transaction ID : SB17-EX227
City Fort Myers	State FL	
Zip Code 33901	Purpose of Disbursement credit card fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	State: District:	credit card fees

SUBTOTAL of Disbursements This Page (optional).....	398.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Intuit Payment S CCD		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 21215 Burbank Boulevard Suite 100		Amount of Each Disbursement this Period 216.01
City Woodland Hills State CA Zip Code 91367	Purpose of Disbursement credit card fees for April	Transaction ID : SB17-EX190
Candidate Name	Category/Type 001	credit card fees for April
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. IContribute		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 725 8th Street SE		Amount of Each Disbursement this Period 580.00
City Washington State DC Zip Code 20003	Purpose of Disbursement credit card fees	Transaction ID : SB17-EX188
Candidate Name	Category/Type 001	credit card fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) C. IContribute		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 725 8th Street SE		Amount of Each Disbursement this Period 479.38
City Washington State DC Zip Code 20003	Purpose of Disbursement credit card fees	Transaction ID : SB17-EX231
Candidate Name	Category/Type 001	credit card fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1275.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 132		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. IContribute		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 725 8th Street SE		Amount of Each Disbursement this Period 263.25
City Washington	State DC Zip Code 20003	
Purpose of Disbursement credit card fees	Category/Type 001	Transaction ID : SB17-EX224
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	credit card fees
State: District:		

Full Name (Last, First, Middle Initial) B. IContribute		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 725 8th Street SE		Amount of Each Disbursement this Period 203.75
City Washington	State DC Zip Code 20003	
Purpose of Disbursement credit card fees	Category/Type 001	Transaction ID : SB17-EX228
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	credit card fees
State: District:		

Full Name (Last, First, Middle Initial) c. Engage LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 725 8th St SE		Amount of Each Disbursement this Period 2000.00
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Web hosting	Category/Type 001	Transaction ID : SB17-EX153
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Web hosting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2467.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Engage LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 725 8th St SE		Amount of Each Disbursement this Period 300.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Web hosting	Transaction ID : SB17-EX173
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Web hosting
State: District:		

Full Name (Last, First, Middle Initial) B. Engage LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012
Mailing Address 725 8th St SE		Amount of Each Disbursement this Period 950.40
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Web hosting changes	Transaction ID : SB17-EX178
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Web hosting changes
State: District:		

Full Name (Last, First, Middle Initial) c. Engage LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 725 8th St SE		Amount of Each Disbursement this Period 2000.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement web consulting	Transaction ID : SB17-EX214
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	web consulting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3250.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 132		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Engage LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012
Mailing Address 725 8th St SE		Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement facebook ads	Transaction ID : SB17-EX215
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	facebook ads
State: District:		

Full Name (Last, First, Middle Initial) B. Island Graphics of Sanibel LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 1630 Periwinkle Way		Amount of Each Disbursement this Period 997.09
City Sanibel	State FL	
Zip Code 33957	Purpose of Disbursement Door hangers & invitations	Transaction ID : SB17-EX180
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Door hangers & invitations
State: District:		

Full Name (Last, First, Middle Initial) c. Island Graphics of Sanibel LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address 1630 Periwinkle Way		Amount of Each Disbursement this Period 21.87
City Sanibel	State FL	
Zip Code 33957	Purpose of Disbursement Door hangers	Transaction ID : SB17-EX207
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Door hangers
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1518.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Linda Uhler		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 9426 Yucca Ct.		Amount of Each Disbursement this Period 1831.62
City Sanibel	State FL	
Zip Code 33957	Purpose of Disbursement 3/1/12 to 3/31/12	Transaction ID : SB17-EX101
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	3/1/12 to 3/31/12
State: District:		

Full Name (Last, First, Middle Initial) B. Linda Uhler		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 9426 Yucca Ct.		Amount of Each Disbursement this Period 213.59
City Sanibel	State FL	
Zip Code 33957	Purpose of Disbursement see memo items	Transaction ID : SB17-EX142
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	see memo items
State: District:		

Full Name (Last, First, Middle Initial) c. Sanibel Post Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 650 Tarpon Bay Rd.		Amount of Each Disbursement this Period 153.00
City Sanibel	State FL	
Zip Code 33957	Purpose of Disbursement postage	Transaction ID : SB17-EX137
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2045.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Sanibel Post Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 650 Tarpon Bay Rd.		Amount of Each Disbursement this Period 18.31
City Sanibel State FL Zip Code 33957	Purpose of Disbursement paper 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX138 [MEMO ITEM] Reimbursement reported on earlier filing:Postage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	

Full Name (Last, First, Middle Initial) B. Sanibel Post Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 650 Tarpon Bay Rd.		Amount of Each Disbursement this Period 18.00
City Sanibel State FL Zip Code 33957	Purpose of Disbursement postage 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX141 [MEMO ITEM] Reimbursement reported on earlier filing:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	

Full Name (Last, First, Middle Initial) c. Target		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 2430 Santa Barbara Blvd		Amount of Each Disbursement this Period 12.13
City Cape Coral State FL Zip Code 33990	Purpose of Disbursement envelopes & labels 001 Category/Type	
Candidate Name		Transaction ID : SB17-EX144 [MEMO ITEM] Reimbursement reported on earlier filing:
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Sanibel Post Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 650 Tarpon Bay Rd.		Amount of Each Disbursement this Period 5.30
City Sanibel	State FL Zip Code 33957	
Purpose of Disbursement postage	Category/Type 001	Transaction ID : SB17-EX145
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:
State: District:		

Full Name (Last, First, Middle Initial) B. Sanibel Post Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 650 Tarpon Bay Rd.		Amount of Each Disbursement this Period 6.85
City Sanibel	State FL Zip Code 33957	
Purpose of Disbursement postage	Category/Type 001	Transaction ID : SB17-EX139
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Linda Uhler		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 9426 Yucca Ct.		Amount of Each Disbursement this Period 1831.61
City Sanibel	State FL Zip Code 33957	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : SB17-EX157
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1831.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 483.00
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement 3/1/12-3/31/12	Transaction ID : SB17-EX95
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	3/1/12-3/31/12
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 166.75
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Medicare	Transaction ID : SB17-EX96
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Medicare
State: District:		

Full Name (Last, First, Middle Initial) C. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 2624.88
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement 3/1/12 to 3/30/12	Transaction ID : SB17-EX97
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	3/1/12 to 3/30/12
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3274.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 87.84
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement 3/1/12 to 3/31/12	Transaction ID : SB17-EX98
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	3/1/12 to 3/31/12
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 30.32
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement 3/1/12 to 3/31/12	Transaction ID : SB17-EX99
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	3/1/12 to 3/31/12
State: District:		

Full Name (Last, First, Middle Initial) C. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 141.64
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement 3/1/12 to 3/31/12	Transaction ID : SB17-EX100
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	3/1/12 to 3/31/12
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	259.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 1108.77
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement employer payroll liab	Transaction ID : SB17-EX187
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	employer payroll liab
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 87.84
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Social Security tax	Transaction ID : SB17-EX160
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Social Security tax
State: District:		

Full Name (Last, First, Middle Initial) C. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 30.33
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Medicare tax	Transaction ID : SB17-EX161
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Medicare tax
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1226.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. United States Treasury-Payroll Taxes			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225			Amount of Each Disbursement this Period 141.64
City Atlanta	State GA	Zip Code 30348	Transaction ID : SB17-EX162
Purpose of Disbursement Fed Income tax		Category/ Type 001	
Candidate Name			Fed Income tax
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012		
State: District:			

Full Name (Last, First, Middle Initial) B. United States Treasury-Payroll Taxes			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225			Amount of Each Disbursement this Period 483.00
City Atlanta	State GA	Zip Code 30348	Transaction ID : SB17-EX163
Purpose of Disbursement Social security tax		Category/ Type 001	
Candidate Name			Social security tax
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012		
State: District:			

Full Name (Last, First, Middle Initial) C. United States Treasury-Payroll Taxes			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225			Amount of Each Disbursement this Period 166.75
City Atlanta	State GA	Zip Code 30348	Transaction ID : SB17-EX164
Purpose of Disbursement Medicare tax		Category/ Type 001	
Candidate Name			Medicare tax
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	791.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 2624.88
City Atlanta State GA Zip Code 30348	Purpose of Disbursement Fed income tax Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Transaction ID : SB17-EX165
State: District:		Fed income tax

Full Name (Last, First, Middle Initial) B. United States Treasury-Payroll Taxes		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address P.O. Box 105225		Amount of Each Disbursement this Period 1108.77
City Atlanta State GA Zip Code 30348	Purpose of Disbursement employer payroll liab Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Transaction ID : SB17-EX223
State: District:		employer payroll liab

Full Name (Last, First, Middle Initial) c. Sheryl Wooley		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1400 SW 48th Terrace		Amount of Each Disbursement this Period 8225.37
City Cape Coral State FL Zip Code 33914	Purpose of Disbursement 3-1-12 to 3-31-12 Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Transaction ID : SB17-EX69
State: District:		3-1-12 to 3-31-12

SUBTOTAL of Disbursements This Page (optional).....	11959.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Sheryl Wooley		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1400 SW 48th Terrace		Amount of Each Disbursement this Period 123.46
City Cape Coral	State FL	Zip Code 33914
Purpose of Disbursement See Memo items	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX107
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	See Memo items
State: District:		

Full Name (Last, First, Middle Initial) B. Sheryl Wooley		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 1400 SW 48th Terrace		Amount of Each Disbursement this Period 8225.37
City Cape Coral	State FL	Zip Code 33914
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Salary
State: District:		

Full Name (Last, First, Middle Initial) C. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 7171 Cypress Lake Drive		Amount of Each Disbursement this Period 9.58
City Fort Myers	State FL	Zip Code 33907
Purpose of Disbursement see memo items	Category/Type 001	
Candidate Name		Transaction ID : SB17-EX248
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Office supplies
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8348.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 132			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Sheryl Wooley		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2012
Mailing Address 1400 SW 48th Terrace		Amount of Each Disbursement this Period 85.70
City Cape Coral	State FL	Zip Code 33914
Purpose of Disbursement see memo items	001 Category/ Type	
Candidate Name	Transaction ID : SB17-EX247	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Bottled water office supplies	

Full Name (Last, First, Middle Initial) B. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 7171 Cypress Lake Drive		Amount of Each Disbursement this Period 177.65
City Fort Myers	State FL	Zip Code 33907
Purpose of Disbursement see memo items	001 Category/ Type	
Candidate Name	Transaction ID : SB17-EX243	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Copier paper coffee office supplies	

Full Name (Last, First, Middle Initial) C. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 7171 Cypress Lake Drive		Amount of Each Disbursement this Period 21.10
City Fort Myers	State FL	Zip Code 33907
Purpose of Disbursement see memo items	001 Category/ Type	
Candidate Name	Transaction ID : SB17-EX283	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Office supplies	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Florida Power & Light Company			Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012	
Mailing Address P.O. Box 025576			Amount of Each Disbursement this Period 55.10	
City Miami	State FL	Zip Code 33102	Transaction ID : SB17-EX135	
Purpose of Disbursement Electric bill		Category/ Type 001	Electric bill	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Florida Power & Light Company			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012	
Mailing Address P.O. Box 025576			Amount of Each Disbursement this Period 69.89	
City Miami	State FL	Zip Code 33102	Transaction ID : SB17-EX192	
Purpose of Disbursement Electric bill		Category/ Type 001	Electric bill	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Comcast			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012	
Mailing Address P.O. Box 105184			Amount of Each Disbursement this Period 288.46	
City Atlanta	State GA	Zip Code 30348	Transaction ID : SB17-EX176	
Purpose of Disbursement Telephone & internet		Category/ Type 001	Telephone & internet	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	413.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address P.O. Box 105184		Amount of Each Disbursement this Period 172.21
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Telephone & internet	Transaction ID : SB17-EX172
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Telephone & internet
State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address P.O. Box 105184		Amount of Each Disbursement this Period 172.21
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Phone & Internet	Transaction ID : SB17-EX206
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Phone & Internet
State: District:		

Full Name (Last, First, Middle Initial) c. Department Of State		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 500 S. Bronough St-R.A. Gray Bldg Room 316		Amount of Each Disbursement this Period 10440.00
City Tallahassee	State FL	
Zip Code 32399	Purpose of Disbursement Qualifying fee	Transaction ID : SB17-EX182
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Qualifying fee
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10784.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Card Service Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address P.O. Box 569120		Amount of Each Disbursement this Period 2290.91
City Dallas	State TX	
Zip Code 75356	Purpose of Disbursement See memo items	Transaction ID : SB17-EX136
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	See memo items
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 527.60
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement travel	Transaction ID : SB17-EX108
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement travel	Transaction ID : SB17-EX109
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2290.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 37.00
City Phoenix	State AZ	Zip Code 85034
Purpose of Disbursement travel	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX110	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Reimbursement reported on earlier filing:	

Full Name (Last, First, Middle Initial) B. Collier County Republican		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address 2500 Tamiami Trail North		Amount of Each Disbursement this Period 150.00
City Naples	State FL	Zip Code 34103
Purpose of Disbursement advertising	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX111	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Reimbursement reported on earlier filing:	

Full Name (Last, First, Middle Initial) C. AT & T		Date of Disbursement MM / DD / YYYY 02 / 17 / 2012
Mailing Address P.O. Box 183037		Amount of Each Disbursement this Period 254.39
City Columbus	State OH	Zip Code 43218
Purpose of Disbursement Phone	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX114	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Reimbursement reported on earlier filing:Phone	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement MM / DD / YYYY 02 / 24 / 2012
Mailing Address 1516 2nd Avenue		Amount of Each Disbursement this Period 1251.92
City Seattle	State WA	
Zip Code 98101	Purpose of Disbursement Office computers	Transaction ID : SB17-EX112
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 02 / 24 / 2012
Mailing Address 8695 College Parkway		Amount of Each Disbursement this Period 45.00
City Fort Myers	State FL	
Zip Code 33919	Purpose of Disbursement Postage	Transaction ID : SB17-EX113
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:
State: District:		

Full Name (Last, First, Middle Initial) c. Card Service Center		Date of Disbursement MM / DD / YYYY 04 / 02 / 2012
Mailing Address P.O. Box 569120		Amount of Each Disbursement this Period 2290.91
City Dallas	State TX	
Zip Code 75356	Purpose of Disbursement See memo items	Transaction ID : SB17-EX115
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Walgreens		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 12749 S. Cleveland Avenue		Amount of Each Disbursement this Period 697.63
City Fort Myers	State FL	
Zip Code 33907	Purpose of Disbursement See memo items	Transaction ID : SB17-EX209
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Purchase maps
State: District:		

Full Name (Last, First, Middle Initial) B. Card Service Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address P.O. Box 569120		Amount of Each Disbursement this Period 697.63
City Dallas	State TX	
Zip Code 75356	Purpose of Disbursement see memo items	Transaction ID : SB17-EX146
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	see memo items
State: District:		

Full Name (Last, First, Middle Initial) c. Federal City Caterers		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 1119 12th Street NW		Amount of Each Disbursement this Period 371.80
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement event food	Transaction ID : SB17-EX149
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Reimbursement reported on earlier filing:
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	697.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Federal City Caterers		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2012
Mailing Address 1119 12th Street NW		Amount of Each Disbursement this Period 178.60
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Air travel	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX147	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Reimbursement reported on earlier filing:	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address 8695 College Parkway		Amount of Each Disbursement this Period 90.00
City Fort Myers	State FL	Zip Code 33919
Purpose of Disbursement postage	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX148	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] Reimbursement reported on earlier filing:	

Full Name (Last, First, Middle Initial) c. Card Service Center		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address P.O. Box 569120		Amount of Each Disbursement this Period 57.33
City Dallas	State TX	Zip Code 75356
Purpose of Disbursement Credit card expenses	Category/Type 001	
Candidate Name	Transaction ID : SB17-EX150	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Card Service Center		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address P.O. Box 569120		Amount of Each Disbursement this Period 604.73
City Dallas	State TX	
Zip Code 75356	Purpose of Disbursement See Memo items	Transaction ID : SB17-EX198
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	See Memo items
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 8695 College Parkway		Amount of Each Disbursement this Period 135.00
City Fort Myers	State FL	
Zip Code 33919	Purpose of Disbursement Postage	Transaction ID : SB17-EX193
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] postage
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 8695 College Parkway		Amount of Each Disbursement this Period 52.78
City Fort Myers	State FL	
Zip Code 33919	Purpose of Disbursement Postage	Transaction ID : SB17-EX194
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Postage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	604.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 8695 College Parkway		Amount of Each Disbursement this Period 68.02
City Fort Myers	State FL	
Zip Code 33919	Purpose of Disbursement postage	Transaction ID : SB17-EX195
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Event drinks
State: District:		

Full Name (Last, First, Middle Initial) B. Lowe's		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 14960 S. Tamiami Trail		Amount of Each Disbursement this Period 73.07
City Ft. Myers	State FL	
Zip Code 33912	Purpose of Disbursement Office table	Transaction ID : SB17-EX196
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] office table
State: District:		

Full Name (Last, First, Middle Initial) c. Sanmar Corp		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address 30500 SE 79th Street		Amount of Each Disbursement this Period 275.76
City Issaquah	State WA	
Zip Code 98027	Purpose of Disbursement Polo shirts	Transaction ID : SB17-EX197
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] Polo shirts
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Card Service Center		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address P.O. Box 569120		Amount of Each Disbursement this Period 6096.63
City Dallas	State TX	Zip Code 75356
Purpose of Disbursement Postage & Purchase e-mail addresses	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX213
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	Postage & Purchase e-mail addresses	

Full Name (Last, First, Middle Initial) B. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 6032.70
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Purchase e-mail addresses	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX212
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] purchase e-mail addresses	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address 8695 College Parkway		Amount of Each Disbursement this Period 45.00
City Fort Myers	State FL	Zip Code 33919
Purpose of Disbursement postage	Category/ Type 001	
Candidate Name		Transaction ID : SB17-EX208
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:	[MEMO ITEM] postage	

SUBTOTAL of Disbursements This Page (optional).....	6096.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 132			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 18.93
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Maps	Transaction ID : SB17-EX211
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	[MEMO ITEM] purchase maps
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex Of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 3860 Colonial Blvd. Suite 100		Amount of Each Disbursement this Period 101.80
City Fort Myers	State FL	
Zip Code 33966	Purpose of Disbursement payroll processing	Transaction ID : SB17-EX191
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	payroll processing
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex Of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 3860 Colonial Blvd. Suite 100		Amount of Each Disbursement this Period 7.50
City Fort Myers	State FL	
Zip Code 33966	Purpose of Disbursement Payroll quarterly reports	Transaction ID : SB17-EX175
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Payroll quarterly reports
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	109.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. David Alpert		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2012
Mailing Address 2084 Laguna Way		Amount of Each Disbursement this Period 700.00
City Naples	State FL	
Zip Code 34109	Purpose of Disbursement	Transaction ID : SB17-EX118
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Administrative/Salary/Overhead Expenses
State: District:		

Full Name (Last, First, Middle Initial) B. The Gasparilla Inn & Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address P.O. Box 1088		Amount of Each Disbursement this Period 1585.12
City Boca Grande	State FL	
Zip Code 33921	Purpose of Disbursement Fundraising event	Transaction ID : SB17-EX131
Candidate Name	007 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Fundraising event
State: District:		

Full Name (Last, First, Middle Initial) c. The Orbit Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 16450-3 South Tamiami Trail		Amount of Each Disbursement this Period 1000.00
City Fort Myers	State FL	
Zip Code 33908	Purpose of Disbursement campaign consulting	Transaction ID : SB17-EX132
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	campaign consulting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3285.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. The Orbit Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 16450-3 South Tamiami Trail		Amount of Each Disbursement this Period 1000.00
City Fort Myers	State FL	
Zip Code 33908	Purpose of Disbursement Campaign organizer	Transaction ID : SB17-EX134
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	Campaign organizer
State: District:		

Full Name (Last, First, Middle Initial) B. Strategic Media Placement Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 38330.00
City Delaware	State OH	
Zip Code 43015	Purpose of Disbursement TV advertising	Transaction ID : SB17-EX166
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	TV advertising
State: District:		

Full Name (Last, First, Middle Initial) c. Shark Tank Media LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address P.O. Box 11804		Amount of Each Disbursement this Period 1000.00
City Ft. Lauderdale	State FL	
Zip Code 33339	Purpose of Disbursement advertising	Transaction ID : SB17-EX170
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	advertising
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	40330.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. The Strategy Group For Media Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 889.40
City DElaware State OH Zip Code 43015	Purpose of Disbursement Travel & meeting reimbursement	Transaction ID : SB17-EX185
Candidate Name	Category/Type 001	Travel & meeting reimbursement
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) B. Macbeth Photography		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address 112 S. Hampton Ave.		Amount of Each Disbursement this Period 372.75
City Orlando State FL Zip Code 32803	Purpose of Disbursement Executive portraits on location	Transaction ID : SB17-EX186
Candidate Name	Category/Type 001	Executive portraits on location
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

Full Name (Last, First, Middle Initial) C. J. Keith Arnold		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 14101 River Rd		Amount of Each Disbursement this Period 500.00
City Fort Myers State FL Zip Code 33905	Purpose of Disbursement IN-KIND RECEIVED food	Transaction ID : SB17-CN866
Candidate Name	Category/Type	In-Kind Received food
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1762.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 132	
	<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)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Patricia M Barton		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 605 Palm Cir E		Amount of Each Disbursement this Period 603.93
City Naples	State FL	Zip Code 34102
Purpose of Disbursement IN-KIND RECEIVED food & beverage	Transaction ID : SB17-CN850	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received food & beverage
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. William L Barton		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2012
Mailing Address 605 Palm Cr E		Amount of Each Disbursement this Period 603.93
City Naples	State FL	Zip Code 34102
Purpose of Disbursement IN-KIND RECEIVED Food & beverage	Transaction ID : SB17-CN849	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received Food & beverage
State: District:		

Full Name (Last, First, Middle Initial) c. Carl Joseph Coleman		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 2104 West First St #2503		Amount of Each Disbursement this Period 1000.00
City Fort Myers	State FL	Zip Code 33901
Purpose of Disbursement IN-KIND RECEIVED food	Transaction ID : SB17-CN867	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received food
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2207.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Gena Milena Eddy			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012	
Mailing Address 5546 Shaddelee Ln W			Amount of Each Disbursement this Period 1000.00	
City Fort Myers	State FL	Zip Code 33919	Transaction ID : SB17-CN857	
Purpose of Disbursement IN-KIND RECEIVED Food		Category/ Type	In-Kind Received Food	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Michele E Eddy			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012	
Mailing Address 5546 Shaddelee Ln W			Amount of Each Disbursement this Period 2235.93	
City Fort Myers	State FL	Zip Code 33919	Transaction ID : SB17-CN856	
Purpose of Disbursement IN-KIND RECEIVED Food & decorations		Category/ Type	In-Kind Received Food & decorations	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) C. Jon K Finstrom			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012	
Mailing Address 1323 Gasparilla Dr			Amount of Each Disbursement this Period 1431.29	
City Fort Myers	State FL	Zip Code 33901	Transaction ID : SB17-CN859	
Purpose of Disbursement IN-KIND RECEIVED Food & beverage		Category/ Type	In-Kind Received Food & beverage	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4667.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Carole A Green		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 5260 S Landings Dr Unit #1601		Amount of Each Disbursement this Period 250.00
City Fort Myers	State FL Zip Code 33919	
Purpose of Disbursement IN-KIND RECEIVED Food	Category/Type	Transaction ID : SB17-CN853
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received Food
State: District:		

Full Name (Last, First, Middle Initial) B. Tramm Hudson		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 988 Boulevard of the Arts #1814		Amount of Each Disbursement this Period 525.00
City Sarasota	State FL Zip Code 34236	
Purpose of Disbursement IN-KIND RECEIVED Food	Category/Type	Transaction ID : SB17-CN860
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received Food
State: District:		

Full Name (Last, First, Middle Initial) c. Cindy Lignelli		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2012
Mailing Address P.O. Box 296		Amount of Each Disbursement this Period 250.00
City Bokeelia	State FL Zip Code 33922	
Purpose of Disbursement IN-KIND RECEIVED Food	Category/Type	Transaction ID : SB17-CN848
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received Food
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 132			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Marilyn W Miller		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 2161 Lochmoor Cir		Amount of Each Disbursement this Period 500.00
City North Fort Myers	State FL	
Zip Code 33903	Purpose of Disbursement IN-KIND RECEIVED food	Transaction ID : SB17-CN869
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received food
State: District:		

Full Name (Last, First, Middle Initial) B. Khosrow Moaveni		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 4351 Gulf Shore Blvd N Apt 15n		Amount of Each Disbursement this Period 1000.00
City Naples	State FL	
Zip Code 34103	Purpose of Disbursement IN-KIND RECEIVED food	Transaction ID : SB17-CN864
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received food
State: District:		

Full Name (Last, First, Middle Initial) c. Fred Pezeshkan		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2012
Mailing Address 3725 Fort Charles Dr		Amount of Each Disbursement this Period 1148.91
City Naples	State FL	
Zip Code 34102	Purpose of Disbursement IN-KIND RECEIVED Food	Transaction ID : SB17-CN855
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received Food
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2648.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Sandra Lynn Kolar Stilwell			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2012	
Mailing Address 18130 Old Pelican Bay Dr			Amount of Each Disbursement this Period 500.00	
City Fort Myers Beach	State FL	Zip Code 33931	Transaction ID : SB17-CN854	
Purpose of Disbursement IN-KIND RECEIVED Food		Category/ Type		
Candidate Name			In-Kind Received Food	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) B. Marilyn M Stout			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012	
Mailing Address 2907 SW 29th Ave			Amount of Each Disbursement this Period 203.15	
City Cape Coral	State FL	Zip Code 33914	Transaction ID : SB17-CN858	
Purpose of Disbursement IN-KIND RECEIVED Food		Category/ Type		
Candidate Name			In-Kind Received Food	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

Full Name (Last, First, Middle Initial) c. Randy W White			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2012	
Mailing Address 648 Lake Murex Cir			Amount of Each Disbursement this Period 500.00	
City Sanibel	State FL	Zip Code 33957	Transaction ID : SB17-CN861	
Purpose of Disbursement IN-KIND RECEIVED Food & beverage		Category/ Type		
Candidate Name			In-Kind Received Food & beverage	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1203.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 132	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Chauncey Goss

Full Name (Last, First, Middle Initial) A. Ms. Shirley A Wood		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 1400 SW 48th Ter		Amount of Each Disbursement this Period 1000.00
City Cape Coral	State FL	
Zip Code 33914	Purpose of Disbursement IN-KIND RECEIVED Food & Beverage	Transaction ID : SB17-CN870
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2012	In-Kind Received Food & Beverage
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	134547.63

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Friends of Chauncey Goss** Transaction ID : **SC10-LN1**

LOAN SOURCE Full Name (Last, First, Middle Initial) Chauncey Goss	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 1139		

City	State	ZIP Code
Sanibel	FL	33957

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7059.83	.00	7059.83

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 31 / Y 2011	M 12 / D 31 / Y 2025	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:150px" type="text"/>

SUBTOTALS This Period This Page (optional).....	7059.83
TOTALS This Period (last page in this line only).....	7059.83

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PF Collier LLC

Mailing Address 308 Spider Lily Lane

City State Zip Code
Naples FL 34119

Nature of Debt (Purpose):
Invoice: rent and deposit

Outstanding Balance Beginning This Period **Transaction ID : SD9-INV42**

-1000.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

.00 .00 .00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Strategy Group For Media Inc.

Nature of Debt (Purpose):
Invoice: Travel & meeting reimbursement

Mailing Address 7669 Stagers Loop

City State Zip Code
DElaware OH 43015

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV139

889.40

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

.00

889.40

.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Island Graphics of Sanibel LLC

Nature of Debt (Purpose):
Invoice: Thank you cards & envelopes

Mailing Address 1630 Periwinkle Way

City State Zip Code
Sanibel FL 33957

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV177

.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

36.31

.00

36.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Artype Inc.

Nature of Debt (Purpose):
Invoice: Name tags

Mailing Address 3530 Work Drive

City State Zip Code
Fort Myers FL 33916

Outstanding Balance Beginning This Period

Transaction ID : SD10-INV179

.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

38.16

.00

38.16

1) **SUBTOTALS** This Period This Page (optional) ▶

74.47

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 132 OF 132
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Friends of Chauncey Goss

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gena Eddy	Nature of Debt (Purpose): Invoice: Car magnet for advertising
Mailing Address 5546 Shaddelee Ln. West	
City State Zip Code Fort Myers FL 33919	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10-INV178	
Amount Incurred This Period <input type="text" value="74.93"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="74.93"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christine Intartaglio	Nature of Debt (Purpose): Invoice: Design brochure
Mailing Address 8886 Staghorn Way	
City State Zip Code Fort Myers FL 33908	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10-INV182	
Amount Incurred This Period <input type="text" value="60.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="60.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="134.93"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="209.40"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="7059.83"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="7269.23"/>