

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Bilirakis for Congress

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)).....	41222.99	883213.38
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	41222.99	883213.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	31601.70	524260.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	2667.36	15595.71
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28934.34	508664.45
8. Cash on Hand at Close of Reporting Period (from Line 27).....	329149.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Bilirakis for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
0	4

Y	Y	Y	Y
2	0	1	0

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	26337.99	570649.81
(i) Itemized (use Schedule A).....	2885.00	89776.39
(ii) Unitemized.....	29222.99	660426.20
(iii) TOTAL of contributions from individuals..... ▶	0.00	32.78
(b) Political Party Committees.....	12000.00	222754.40
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	41222.99	883213.38
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	2667.36	15595.71
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	846.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	43890.35	899655.22

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31601.70	524260.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	49200.00	115965.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	80801.70	640225.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	366060.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	43890.35
25. SUBTOTAL (add Line 23 and Line 24).....	409951.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	80801.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	329149.47

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Bilirakis for Congress

<p>A. Full Name (Last, First, Middle Initial) Pamela G. Adams</p> <p>Mailing Address 401 Bayview Drive</p> <p>City State Zip Code Belleair FL 33756-1409</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self-employed Occupation dentist/attorney</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 07 / 2010</p> <p>Transaction ID: A-C27946</p> <p>Amount of Each Receipt this Period 100.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Arthur C. Anton</p> <p>Mailing Address 416 Commonwealth Avenue Apt. 401</p> <p>City State Zip Code Boston MA 02215-2810</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Anton's Cleaners, Inc. Occupation executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2010</p> <p>Transaction ID: A-C28032</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Dieter William Bergner</p> <p>Mailing Address 4950 Turtle Creek Trail</p> <p>City State Zip Code Oldsmar FL 34677-1969</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer n/a Occupation retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">700.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2010</p> <p>Transaction ID: A-C28049</p> <p>Amount of Each Receipt this Period 100.00</p>
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SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 6 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
Dr George Blanco

Mailing Address 560 Jackson Street N

City State Zip Code
Saint Petersburg FL 33705-1449

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

Name of Employer Self Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: A-C27968

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
J. P. Eatman

Mailing Address 3305 Cummings Place

City State Zip Code
Plant City FL 33566-0732

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

Name of Employer n/a Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	1	0

Transaction ID: A-C28022

Amount of Each Receipt this Period
50.00

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

Mailing Address 15 Winston Drive

City State Zip Code
Belleair FL 33756-1645

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

Name of Employer EEI Manufacturing Services Occupation owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: A-C27965

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
James M. Esser

Mailing Address 2130 Mangrum Drive

City State Zip Code
Dunedin FL 34698-2228

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation
physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00

Date of Receipt M M / D D / Y Y Y Y
07 / 09 / 2010

Transaction ID: A-C27964

Amount of Each Receipt this Period 2400.00

B. Full Name (Last, First, Middle Initial)
Ruth E. Faklis

Mailing Address 7949 Cambridge Drive

City State Zip Code
Orland Park IL 60462-2900

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Prairie Trails Public Library director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1100.00

Date of Receipt M M / D D / Y Y Y Y
07 / 27 / 2010

Transaction ID: A-C28029

Amount of Each Receipt this Period 1000.00

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

Mailing Address 6449 38th Avenue N
Suite F4

City State Zip Code
St Petersburg FL 33710-1654

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fana Medical Group, P.A. office manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2877.56

Date of Receipt M M / D D / Y Y Y Y
07 / 06 / 2010

Transaction ID: A-I27875

Amount of Each Receipt this Period 1337.99

Inkind: food & beverage

SUBTOTAL of Receipts This Page (optional) 4737.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Arlene Fana

Mailing Address 6449 38th Avenue N
Suite F4

City State Zip Code
St Petersburg FL 33710-1654

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

Name of Employer Fana Medical Group, P.A. Occupation office manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2877.56

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2010

Transaction ID: A-C27877

Amount of Each Receipt this Period
600.00

B.

Full Name (Last, First, Middle Initial)
Miguel A. Fana

Mailing Address 6449 38th Avenue N
Suite F4

City State Zip Code
St Petersburg FL 33710-1654

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

Name of Employer Fana Medical Group, P.A. Occupation physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2010

Transaction ID: A-C27876

Amount of Each Receipt this Period
1400.00

C.

Full Name (Last, First, Middle Initial)
Douglas M. Gregory

Mailing Address 101 Constitution Avenue NW
Suite 600W

City State Zip Code
Washington DC 20001-2147

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

Name of Employer Van Scoyoc Associates Occupation vice-president

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2010

Transaction ID: A-C28005

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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 9 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) Douglas M. Gregory	Date of Receipt MM / DD / YYYY 07 / 19 / 2010
	Mailing Address 101 Constitution Avenue NW Suite 600W	Transaction ID: A-C28006
	City State Zip Code Washington DC 20001-2147	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Van Scoyoc Associates Occupation vice-president Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) Dr. John Hoche	Date of Receipt MM / DD / YYYY 07 / 09 / 2010
	Mailing Address 1615 Pasadena Avenue S Suite 300	Transaction ID: A-C27966
	City State Zip Code South Pasadena FL 33707-4567	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Physician Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Thomas C. Horne	Date of Receipt MM / DD / YYYY 07 / 12 / 2010
	Mailing Address 289 Bayside Drive	Transaction ID: A-C28087
	City State Zip Code Clearwater FL 33767-2504	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self-employed Occupation investor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 39
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
Cammy Ioannides

Mailing Address 140 SW Chamber Court
Suite 200

City State Zip Code
Port Saint Lucie FL 34986-3414

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

Name of Employer Occupation
Tim Ioannides, MD LLC Administrator

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2010

Transaction ID: A-C27982

Amount of Each Receipt this Period
500.00

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

Mailing Address 140 SW Chamber Court
Suite 200

City State Zip Code
Port St Lucie FL 34986-3414

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

Name of Employer Occupation
self-employed physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4750.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2010

Transaction ID: A-C27983

Amount of Each Receipt this Period
500.00

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

Mailing Address 499 Park Avenue

City State Zip Code
New York NY 10022-1240

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

Name of Employer Occupation
self-employed entrepreneur

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2010

Transaction ID: A-C27977

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Thomas A. James

Mailing Address 9341 Silverthorn Road

City State Zip Code
Largo FL 33777-3164

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

Name of Employer Raymond James Financial, Inc. Occupation c.e.o.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
07 / 16 / 2010

Transaction ID: A-C27994

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Dr. Alexander R Johnson

Mailing Address 5294 Beach Drive SE Unit B

City State Zip Code
Saint Petersburg FL 33705-4887

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

Name of Employer Self Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2010

Transaction ID: A-C27969

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Greg Johnson

Mailing Address 111 Hickory Creek Boulevard

City State Zip Code
Brandon FL 33511-8065

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

Name of Employer Precise Construction Occupation General Contractor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 06 / 2010

Transaction ID: A-C27879

Amount of Each Receipt this Period
500.00

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)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
George D. Karcazes

Mailing Address 161 N Clark Street
Suite 550

City Chicago State IL Zip Code 60601-3376

FEC ID number of contributing federal political committee. C

Name of Employer Martin & Karcazes, Ltd. Occupation attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2010
Transaction ID: A-C28028
 Amount of Each Receipt this Period 250.00

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

Mailing Address 86 Joan Avenue

City Centereach State NY Zip Code 11720-4415

FEC ID number of contributing federal political committee. C

Name of Employer ProBio Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2010
Transaction ID: A-C28094
 Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Aristotle S. Kornaros

Mailing Address 1350 N Astor Street
Apt. 9A

City Chicago State IL Zip Code 60610-6137

FEC ID number of contributing federal political committee. C

Name of Employer Homescript Pharmacy Occupation healthcare management

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 02 / 2010
Transaction ID: A-C28048
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1050.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial) Kimberly Mahoney		Date of Receipt MM / DD / YYYY 08 / 02 / 2010
Mailing Address 517 Harbor Grove Circle		Transaction ID: A-C28055
City Safety Harbor	State FL	Zip Code 34695-4977
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ST. PETE MRI	Occupation PRESIDENT	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Francis Mccarthy		Date of Receipt MM / DD / YYYY 07 / 07 / 2010
Mailing Address 1826 Speck Drive		Transaction ID: A-C27953
City Holiday	State FL	Zip Code 34691-5312
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer self	Occupation professional	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Roland Metivier		Date of Receipt MM / DD / YYYY 08 / 02 / 2010
Mailing Address 10076 Waltzing Lane		Transaction ID: A-C28056
City Seminole	State FL	Zip Code 33778-3433
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hospital Corp. of America	Occupation CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

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

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

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
Dr Steve Minor

Mailing Address 9652 Maypan Place

City State Zip Code
Largo FL 33777-4906

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

Name of Employer Self Occupation
Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: A-C27971

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr Brian Moss

Mailing Address 7541 Water Silk Dr

City State Zip Code
Pinellas Park FL 33762

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

Name of Employer Self Occupation
Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	1	0

Transaction ID: A-C27972

Amount of Each Receipt this Period
250.00

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

Mailing Address 12983 74th Avenue

City State Zip Code
Seminole FL 33776-4004

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

Name of Employer Adult Care Mgmt Group Occupation
CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: A-C28046

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
Kenneth R. Pohl

Mailing Address 2270 Barbara Drive

City State Zip Code
Clearwater FL 33764-6505

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

Name of Employer Occupation
Alakai Defense Systems Program Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 27 / 2010

Transaction ID: A-C28031

Amount of Each Receipt this Period
300.00

500.00

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

Mailing Address 26910 NW 62nd Avenue

City State Zip Code
High Springs FL 32643-3600

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

Name of Employer Occupation
n/a retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2010

Transaction ID: A-C27959

Amount of Each Receipt this Period
100.00

300.00

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

Mailing Address 1778 Oceanview Drive

City State Zip Code
Saint Petersburg FL 33715-2504

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

Name of Employer Occupation
Self Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2010

Transaction ID: A-C27970

Amount of Each Receipt this Period
250.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 39

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Eugene T. Rossides

Mailing Address 3666 Upton Street NW

City State Zip Code
Washington DC 20008-3125

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

Name of Employer Occupation
n/a retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2010

Transaction ID: A-C28025

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Fadi Saba

Mailing Address 8830 Baywood Park Drive

City State Zip Code
Seminole FL 33777-4605

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

Name of Employer Occupation
Self Employed Doctor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: A-C28093

Amount of Each Receipt this Period
1900.00

C.

Full Name (Last, First, Middle Initial)
Fadi Saba

Mailing Address 8830 Baywood Park Drive

City State Zip Code
Seminole FL 33777-4605

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

Name of Employer Occupation
Self Employed Doctor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 02 / 2010

Transaction ID: A-C28053

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ►

2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) Basil Santamaria		Date of Receipt
	Mailing Address 2600 Brandywine Drive		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Clearwater	FL	33761-4003
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer n/a		Occupation retired	Transaction ID: A-C27849
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="275.00"/>	<input type="text" value="100.00"/>

B.	Full Name (Last, First, Middle Initial) Dr Gregg T Schuyler		Date of Receipt
	Mailing Address 603 77th St South Ste 400		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	St. Petersburg	FL	33701
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Physician	Transaction ID: A-C27967
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Dr Shalin Shah		Date of Receipt
	Mailing Address 10224 Golden Eagle Drive		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Seminole	FL	33778-3830
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Physician	Transaction ID: A-C27973
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 39
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
George T. Soterakis

Mailing Address 200 E 69th Street
Apt. 7L

City State Zip Code
New York NY 10021-5742

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

Name of Employer Occupation
Winston & Strawn, LLP attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2010

Transaction ID: A-C28080

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Samuel V. Spagnolo

Mailing Address 11407 Stonewall Jackson Drive

City State Zip Code
Spotsylvania VA 22551-4608

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

Name of Employer Occupation
Dept. of Veteran Affairs physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2010

Transaction ID: A-C27996

Amount of Each Receipt this Period
100.00

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

Mailing Address 85 Hampton Court

City State Zip Code
Southbury CT 06488-3907

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

Name of Employer Occupation
Merrill Lynch Vice President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 23 / 2010

Transaction ID: A-C28024

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

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

Mailing Address 210 28th Avenue N

City State Zip Code
St Petersburg FL 33704-2935

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

Name of Employer Fantasy Adventures, Inc. Occupation president

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2010

Transaction ID: A-C27989

Amount of Each Receipt this Period
250.00

250.00

B.

Full Name (Last, First, Middle Initial)
Preston Sullivan

Mailing Address 15115 Barby Avenue

City State Zip Code
Tampa FL 33625-1556

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

Name of Employer O'Sullivan Company Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2010

Transaction ID: A-C27882

Amount of Each Receipt this Period
500.00

500.00

C.

Full Name (Last, First, Middle Initial)
James Thomas

Mailing Address 9901 Express Drive # B

City State Zip Code
Highland IN 46322-2610

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

Name of Employer self-employed Occupation accountant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2010

Transaction ID: A-C28082

Amount of Each Receipt this Period
1000.00

2000.00

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: PAGE 20 / 39
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
William G. Ulbricht

Mailing Address 2304 Dovewood Estates Court

City Valrico State FL Zip Code 33594-4659

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

Name of Employer St. Anthony's Hospital Occupation c.e.o.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 08 / 02 / 2010
Transaction ID: A-C28047
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
David J. Zachem

Mailing Address 5127 Caesar Way S

City St Petersburg State FL Zip Code 33712-4254

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

Name of Employer self-employed Occupation real estate appraiser

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 08 / 02 / 2010
Transaction ID: A-C28051
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Justin R. Zinzow

Mailing Address 35111 Us Highway 19 N Suite 302

City Palm Harbor State FL Zip Code 34684-1934

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

Name of Employer Zinzow Martin Occupation attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 06 / 2010
Transaction ID: A-C27880
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00

TOTAL This Period (last page this line number only) ► 26337.99

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

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

FOR LINE NUMBER: PAGE 21 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
AFLAC Incorporated PAC
Mailing Address 1932 Wynnton Road
City Columbus State GA Zip Code 31999-0001
FEC ID number of contributing federal political committee. **C** C00034157
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00
Date of Receipt 07 / 23 / 2010
Transaction ID: A-C28023
Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
American Medical Association PAC
Mailing Address 1101 Vermont Avenue NW
City Washington State DC Zip Code 20005-3521
FEC ID number of contributing federal political committee. **C** C00000422
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 07 / 29 / 2010
Transaction ID: A-C28034
Amount of Each Receipt this Period 2000.00

C. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists PAC
Mailing Address 520 N Northwest Highway
City Park Ridge State IL Zip Code 60068-2538
FEC ID number of contributing federal political committee. **C** C00255752
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00
Date of Receipt 07 / 19 / 2010
Transaction ID: A-C28004
Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 6000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
AT&T, Inc. Federal PAC

Mailing Address 208 S Akard Street
Front 3521

City State Zip Code
Dallas TX 75202-4295

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt

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

Transaction ID: A-C28054

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
CSX Corporation Good Government Fund

Mailing Address 1331 Pennsylvania Avenue NW
Suite 560

City State Zip Code
Washington DC 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: A-C28052

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Federal Express PAC

Mailing Address 942 S Shady Grove Road

City State Zip Code
Memphis TN 38120-4117

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

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

Transaction ID: A-C27939

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' PAC

Mailing Address 1550 Crystal Drive
300

City State Zip Code
Arlington VA 22202-4135

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 0 2 / 2 0 1 0

Transaction ID: A-C28061

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
TECO Energy, Inc. Employees' PAC

Mailing Address 702 N Franklin Street

City State Zip Code
Tampa FL 33602-4429

FEC ID number of contributing federal political committee. **C** C00161422

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 0 2 / 2 0 1 0

Transaction ID: A-C28050

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	12000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 39
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial) Capitol Hill Club		Date of Receipt
Mailing Address 300 1st Street SE		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20003-1801
FEC ID number of contributing federal political committee.		Transaction ID: A-O27985
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2667.36"/>
Occupation		Refunded for double billed invoice.
Receipt For: 2010	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2667.36"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2667.36"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2667.36"/>

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)

<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)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
ABCO Graphics & Printing, Inc.

Mailing Address 11515 Pyramid Drive

City Odessa State FL Zip Code 33556-3457

Purpose of Disbursement
Printing Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-27997

Date of Disbursement

07 / 16 / 2010

Amount of Each Disbursement this Period

101.65

B.

Full Name (Last, First, Middle Initial)
Battleground Group Inc

Mailing Address 3019 Spirea Street

City Sarasota State FL Zip Code 34231-7520

Purpose of Disbursement
Fundraising: Online Fundraising

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-28062

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

3207.00

C.

Full Name (Last, First, Middle Initial)
Bright House Networks

Mailing Address PO Box 30765

City Tampa State FL Zip Code 33630-3765

Purpose of Disbursement
Phone/Internet

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-27886

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

132.76

SUBTOTAL of Disbursements This Page (optional) ▶

3441.41

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) Brushfire Digital LLC	Transaction ID: B-E-27885 Date of Disbursement 07 / 06 / 2010
	Mailing Address 310 E New Hampshire Street	Amount of Each Disbursement this Period 80.75
	City Orlando State FL Zip Code 32804-6406	
	Purpose of Disbursement Fundraising: Email Blasts Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brushfire Digital LLC	Transaction ID: B-E-27999 Date of Disbursement 07 / 16 / 2010
	Mailing Address 310 E New Hampshire Street	Amount of Each Disbursement this Period 80.63
	City Orlando State FL Zip Code 32804-6406	
	Purpose of Disbursement Fundraising: Online Fundraising Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Campaign Graphics Corp.	Transaction ID: B-E-28037 Date of Disbursement 07 / 29 / 2010
	Mailing Address PO Box 4859	Amount of Each Disbursement this Period 2803.70
	City Ocala State FL Zip Code 34478-4859	
	Purpose of Disbursement Advertising: Signs 4x8 Candidate Name	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2965.08
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)

<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)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Chase Cardmember Service

Transaction ID: B-E-27998

Date of Disbursement

Mailing Address PO Box 15153

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	0

City Wilmington State DE Zip Code 19886-5153

Amount of Each Disbursement this Period

3393.69

Purpose of Disbursement
See Memo Entries

001
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

Original vendors exceeding reporting threshold itemized as memo transactions.

State: District:

B.

Full Name (Last, First, Middle Initial)
Courtyard by Marriott

Transaction ID: B-S-217

Date of Disbursement

Mailing Address 4014 Tampa Road

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	0

City Oldsmar State FL Zip Code 34677-3200

Amount of Each Disbursement this Period

888.10

Purpose of Disbursement
Food and Beverage

007
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

[MEMO ITEM]
Subitemization of Chase Cardmember Service(07/16/-10)

State: District:

C.

Full Name (Last, First, Middle Initial)
EM Campaigns, Inc.

Transaction ID: B-E-28010

Date of Disbursement

Mailing Address PO Box 10362

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

City Tallahassee State FL Zip Code 32302-2362

Amount of Each Disbursement this Period

4000.00

Purpose of Disbursement
Fundraising Consulting

001
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7393.69

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

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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)

<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)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) ESP Enterprises	Transaction ID: B-E-28036 Date of Disbursement 07 / 29 / 2010
	Mailing Address 14486 Cortez Boulevard	Amount of Each Disbursement this Period 4153.50
	City Brooksville State FL Zip Code 34613-5975	
	Purpose of Disbursement Advertising: Yard Signs Candidate Name	004 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Grand Hyatt Tampa Bay	Transaction ID: B-S-228 Date of Disbursement 07 / 16 / 2010
	Mailing Address 2900 Bayport Drive	Amount of Each Disbursement this Period 557.39
	City Tampa State FL Zip Code 33607-1479	
	Purpose of Disbursement Lodging Candidate Name	007 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Chase Cardmember Service(07/16/-10)

C.	Full Name (Last, First, Middle Initial) Grand Hyatt Tampa Bay	Transaction ID: B-S-229 Date of Disbursement 07 / 16 / 2010
	Mailing Address 2900 Bayport Drive	Amount of Each Disbursement this Period 469.09
	City Tampa State FL Zip Code 33607-1479	
	Purpose of Disbursement Lodging Candidate Name	007 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Chase Cardmember Service(07/16/-10)

SUBTOTAL of Disbursements This Page (optional)	4153.50
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)

<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)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Home Depot

Mailing Address 1315 U.S. Highway 19, N.

City Tarpon Springs State FL Zip Code 34689

Purpose of Disbursement
Supplies

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-S-216
Date of Disbursement

07 / 16 / 2010

Amount of Each Disbursement this Period

21.24

[MEMO ITEM]

Subitemization of Chase Cardmember Service(07/16/-10)

B.

Full Name (Last, First, Middle Initial)
Home Depot

Mailing Address 1315 U.S. Highway 19, N.

City Tarpon Springs State FL Zip Code 34689

Purpose of Disbursement
Advertising: Lumber for Signs

Candidate Name

004
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-28038
Date of Disbursement

07 / 27 / 2010

Amount of Each Disbursement this Period

781.99

C.

Full Name (Last, First, Middle Initial)
House Gift Shop

Mailing Address 15 Independence Avenue SW

City Washington State DC Zip Code 20515-0001

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-S-220
Date of Disbursement

07 / 16 / 2010

Amount of Each Disbursement this Period

142.33

[MEMO ITEM]

Subitemization of Chase Cardmember Service(07/16/-10)

SUBTOTAL of Disbursements This Page (optional) ▶

781.99

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)

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Koulianos & Associates, P.A.

Transaction ID: B-E-28012
Date of Disbursement

Mailing Address 41 N Ring Avenue

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

City State Zip Code
Tarpon Spgs FL 34689-4303

Amount of Each Disbursement this Period

450.00

Purpose of Disbursement
Accounting Services
Candidate Name
Category/Type
001

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Office Depot Credit Plan

Transaction ID: B-E-28035
Date of Disbursement

Mailing Address 689020 PO Box

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

City State Zip Code
Des Moines IA 50368-0001

Amount of Each Disbursement this Period

413.46

Purpose of Disbursement
Office Supplies
Candidate Name
Category/Type
001

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Petty Cash

Transaction ID: B-E-28019
Date of Disbursement

Mailing Address PO Box 606

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	0

City State Zip Code
Tarpon Spgs FL 34688-0606

Amount of Each Disbursement this Period

196.80

Purpose of Disbursement
Petty Cash
Candidate Name
Category/Type
001

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

1060.26

TOTAL This Period (last page this line number only)

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**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)

<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)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) Progress Energy	Transaction ID: B-E-28000 Date of Disbursement
	Mailing Address PO Box 33199	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City St Petersburg State FL Zip Code 33733-8199	Amount of Each Disbursement this Period
	Purpose of Disbursement Utilities Candidate Name	<input type="text" value="340.99"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Public Storage	Transaction ID: B-S-213 Date of Disbursement
	Mailing Address 38800 Us Highway 19 N	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Tarpon Spgs State FL Zip Code 34689-3961	Amount of Each Disbursement this Period
	Purpose of Disbursement Storage Candidate Name	<input type="text" value="204.88"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Chase Cardmember Service(07/16/-10)

C.	Full Name (Last, First, Middle Initial) Public Storage	Transaction ID: B-S-215 Date of Disbursement
	Mailing Address 38800 Us Highway 19 N	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Tarpon Spgs State FL Zip Code 34689-3961	Amount of Each Disbursement this Period
	Purpose of Disbursement Storage Candidate Name	<input type="text" value="47.81"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Chase Cardmember Service(07/16/-10)

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="340.99"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<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)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) Sam's Club Mailing Address 4330 Us Highway 19 City New Prt Rchy State FL Zip Code 34652-5441 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-27862 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0 Amount of Each Disbursement this Period 57.35 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Sprint Mailing Address PO Box 105243 City Atlanta State GA Zip Code 30348-5243 Purpose of Disbursement Cell Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-28009 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 1 0 Amount of Each Disbursement this Period 500.99 Category/Type 001
C.	Full Name (Last, First, Middle Initial) The Catalyst Group RW, LLC Mailing Address 1115 Massachusetts Avenue NW City Washington State DC Zip Code 20005-4604 Purpose of Disbursement Consulting Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-27887 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 1 0 Amount of Each Disbursement this Period 2077.56 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

2635.90

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)

<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)
Bilirakis for Congress

<p>A. Full Name (Last, First, Middle Initial) The Catalyst Group RW, LLC</p> <p>Mailing Address 1115 Massachusetts Avenue NW</p> <p>City Washington State DC Zip Code 20005-4604</p> <p>Purpose of Disbursement Campaign Event: Food and Beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-28007</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="175.88"/></p> <p>Category/Type: <input type="text" value="007"/></p>
<p>B. Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address Internal Revenue Serv</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-28057</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="794.43"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Florida</p> <p>Mailing Address PO Box 920041</p> <p>City Dallas State TX Zip Code 75392-0041</p> <p>Purpose of Disbursement Phone and Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-28008</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="408.86"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 34 / 39

<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)
Bilirakis for Congress

A.	Full Name (Last, First, Middle Initial) Vettore's Pizzeria Mailing Address 36137 E Lake Road City State Zip Code Palm Harbor FL 34685-3142 Purpose of Disbursement Food and Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-222 Date of Disbursement 07 / 16 / 2010 Amount of Each Disbursement this Period 650.00 [MEMO ITEM] Subitemization of Chase Cardmember Service(07/16-10)
B.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address 35404 Us Highway 19 N City State Zip Code Palm Harbor FL 34684-1738 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-225 Date of Disbursement 07 / 16 / 2010 Amount of Each Disbursement this Period 85.52 [MEMO ITEM] Subitemization of Chase Cardmember Service(07/16-10)
C.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address 35404 Us Highway 19 N City State Zip Code Palm Harbor FL 34684-1738 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-234 Date of Disbursement 07 / 16 / 2010 Amount of Each Disbursement this Period 61.64 [MEMO ITEM] Subitemization of Chase Cardmember Service(07/16-10)

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)

<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)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
Yuma Solutions, Inc.

Transaction ID: B-E-28013
Date of Disbursement

Mailing Address PO Box 152075

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

City Tampa State FL Zip Code 33684-2075

Amount of Each Disbursement this Period

58.00

Purpose of Disbursement
Exchange Server Hosting Fees
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Arlene Fana

Transaction ID: B-I-27875
Date of Disbursement

Mailing Address 6449 38th Avenue N
Suite F4

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	1	0

City St Petersburg State FL Zip Code 33710-1654

Amount of Each Disbursement this Period

1337.99

Purpose of Disbursement
Inkind: food & beverage
Candidate Name

Category/ Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Shawn E. Foster

Transaction ID: B-E-27864
Date of Disbursement

Mailing Address 9842 Balsaridge Court

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	1	0

City Trinity State FL Zip Code 34655-4913

Amount of Each Disbursement this Period

236.50

Purpose of Disbursement
Administrative/Salary/Overhead: Mileage
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

1632.49

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

<p>A. Full Name (Last, First, Middle Initial) Shawn E. Foster</p> <p>Mailing Address 9842 Balsaridge Court</p> <p>City Trinity State FL Zip Code 34655-4913</p> <p>Purpose of Disbursement Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-28039 Date of Disbursement 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 187.23</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Elise Gately</p> <p>Mailing Address 1448 Seagull Drive Apt. 103</p> <p>City Palm Harbor State FL Zip Code 34685-3453</p> <p>Purpose of Disbursement Mileage Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-27935 Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 93.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Elise Gately</p> <p>Mailing Address 1448 Seagull Drive Apt. 103</p> <p>City Palm Harbor State FL Zip Code 34685-3453</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-28040 Date of Disbursement 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 78.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

358.23

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)

<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)
Bilirakis for Congress

<p>A. Full Name (Last, First, Middle Initial) Bryce Hammond</p> <p>Mailing Address 10510 Chilmark Way</p> <p>City Tampa State FL Zip Code 33626-4715</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-27846</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1573.55"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Bryce Hammond</p> <p>Mailing Address 10510 Chilmark Way</p> <p>City Tampa State FL Zip Code 33626-4715</p> <p>Purpose of Disbursement June/July Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-28042</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="132.50"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Bryce Hammond</p> <p>Mailing Address 10510 Chilmark Way</p> <p>City Tampa State FL Zip Code 33626-4715</p> <p>Purpose of Disbursement July Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-28043</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1327.58"/></p> <p>Category/Type: <input type="text" value="001"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3033.63"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

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

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A.

Full Name (Last, First, Middle Initial)
George F Meehan

Transaction ID: B-E-28044
Date of Disbursement

Mailing Address PO Box 606

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

City State Zip Code
Tarpon Springs FL 34688-0606

Amount of Each Disbursement this Period

238.75

Purpose of Disbursement
Mileage / Phone
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
George F Meehan

Transaction ID: B-E-28045
Date of Disbursement

Mailing Address PO Box 606

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

City State Zip Code
Tarpon Springs FL 34688-0606

Amount of Each Disbursement this Period

2118.85

Purpose of Disbursement
Administrative/Salary/Overhead: Salary
Candidate Name

001
Category/ Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

2357.60

TOTAL This Period (last page this line number only)

31533.94

**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)

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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Bilirakis for Congress

A. Full Name (Last, First, Middle Initial) National Republican Congressional Committee <hr/> Mailing Address 320 1st Street SE <hr/> City Washington State DC Zip Code 20003-1838 <hr/> Purpose of Disbursement Political Contribution: Excess Funds Candidate Name National Republican Congressional Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-28021 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 45000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Operation Helping Hand <hr/> Mailing Address PO Box 6383 <hr/> City Tampa State FL Zip Code 33608-0383 <hr/> Purpose of Disbursement Charitable Donation: Charity Donation Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-28020 Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2010
	Amount of Each Disbursement this Period 4200.00 Category/Type 012

SUBTOTAL of Disbursements This Page (optional) ►

49200.00

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

49200.00