

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Sun Political Action Committee

ADDRESS (number and street) 999 Ponce de Leon Boulevard
Suite 625
 Check if different than previously reported. (ACC)
Coral Gables FL 33134

2. **FEC IDENTIFICATION NUMBER** C00378216
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2009 through 12 31 2009

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 Stewart Appelrouth

Signature of Treasurer Electronically Filed by Stewart Appelrouth Date 07 14 2010

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Sun Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		3972.19
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	34376.00									
(c) Total Receipts (from Line 19)	28255.16	84508.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62631.16	88480.35								
7. Total Disbursements (from Line 31)	34375.00	60224.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28256.16	28256.16								
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									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name
Sun Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	28250.00	84500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	28250.00	84500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	28250.00	84500.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	3.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	5.16	5.16
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28255.16	84508.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28255.16	84508.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1875.00	4224.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1875.00	4224.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32500.00	56000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	34375.00	60224.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34375.00	60224.19

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	28250.00	84500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28250.00	84500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1875.00	4224.19
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	3.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1875.00	4221.19

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
Sun Political Action Committee

A.	Full Name (Last, First, Middle Initial) Leslie Adler		Date of Receipt
	Mailing Address 8140 S.W. 151 Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Miami	FL	33158
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4982
Name of Employer Berman Switchcow et al		Occupation Accountant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Jill Berman		Date of Receipt
	Mailing Address 146 W. Sunrise Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Coral Gables	FL	33133
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4979
Name of Employer Berman Wolfe & Rennert		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1250.00

C.	Full Name (Last, First, Middle Initial) Michael Budwick		Date of Receipt
	Mailing Address 3061 A Mary Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Coconut Grove	FL	33133
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4989
Name of Employer Meland, Russin & Budwick, P.A.		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 4750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

A.

Full Name (Last, First, Middle Initial) David Ertel		Date of Receipt <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	5	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	5	/	2	0	0	9													
Mailing Address 640 Destacada Avenue		Transaction ID: SA11AI.4983																				
City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period <table border="1"><tr><td>2500.00</td></tr></table>		2500.00																			
2500.00																						
FEC ID number of contributing federal political committee. C																						
Name of Employer Bayview Capital	Occupation Mortgage Lender																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>2500.00</td></tr></table>		2500.00																			
2500.00																						

B.

Full Name (Last, First, Middle Initial) Andrew Freedman		Date of Receipt <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	4	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	1	4	/	2	0	0	9													
Mailing Address 5295 Hammock Drive		Transaction ID: SA11AI.4977																				
City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period <table border="1"><tr><td>2500.00</td></tr></table>		2500.00																			
2500.00																						
FEC ID number of contributing federal political committee. C																						
Name of Employer Fir Tree Partners	Occupation Managing Partner																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>2500.00</td></tr></table>		2500.00																			
2500.00																						

C.

Full Name (Last, First, Middle Initial) Fredric Garvett		Date of Receipt <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	3	0	/	2	0	0	9													
Mailing Address 7541 S.W. 114 Street		Transaction ID: SA11AI.4993																				
City State Zip Code Miami FL 33156	Amount of Each Receipt this Period <table border="1"><tr><td>1250.00</td></tr></table>		1250.00																			
1250.00																						
FEC ID number of contributing federal political committee. C																						
Name of Employer Silver & Garvett	Occupation Attorney																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>3750.00</td></tr></table>		3750.00																			
3750.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>6250.00</td></tr></table>	6250.00
6250.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Gabriel Gilinski</p> <p>Mailing Address 20 Indian Creek Island Road</p> <p>City State Zip Code Indian Creek Villa FL 33154</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation JGB Bank Banker</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 05 / 2009</p> <p>Transaction ID: SA11AI.4980</p> <p>Amount of Each Receipt this Period 2500.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Lawrence Hellring</p> <p>Mailing Address 9875 N.W. 79 Avenue</p> <p>City State Zip Code Hialeah Gardens FL 33016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Superior Window Corp Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 11 / 2009</p> <p>Transaction ID: SA11AI.4986</p> <p>Amount of Each Receipt this Period 1250.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Joel Hoppenstein</p> <p>Mailing Address 90 Alton Road Unit 1803</p> <p>City State Zip Code Miami Beach FL 33139</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hewlands Group LLC Investor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2009</p> <p>Transaction ID: SA11AI.4988</p> <p>Amount of Each Receipt this Period 1250.00</p>
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SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

A.

Full Name (Last, First, Middle Initial) Joseph Jacoby	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
Mailing Address 11900 S.W. 66 Avenue	Transaction ID: SA11AI.4985
City State Zip Code Miami FL 33176	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Anderson & Jacoby Insurance	Occupation Insurance Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00

B.

Full Name (Last, First, Middle Initial) Ian Kaplan	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
Mailing Address 305 N. Hibiscus Drive	Transaction ID: SA11AI.4976
City State Zip Code Miami FL 33139	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Trans Chem Corp.	Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00

C.

Full Name (Last, First, Middle Initial) Geoffrey Robbins	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
Mailing Address 19495 Biscayne Boulevard	Transaction ID: SA11AI.4987
City State Zip Code Miami FL 33180	Amount of Each Receipt this Period 1250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Morgan Stanley	Occupation Investment Counselor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00

SUBTOTAL of Receipts This Page (optional)	3750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

A.	Full Name (Last, First, Middle Initial) Linda Rozynes	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 13631 Deering Bay Drive 258	Transaction ID: SA11AI.4992
	City State Zip Code Coral Gables FL 33158	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1000.00	

B.	Full Name (Last, First, Middle Initial) Edward Schmidt	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 7331 S.W. 113 Street	Transaction ID: SA11AI.4973
	City State Zip Code Miami FL 33156	Amount of Each Receipt this Period 1250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1250.00	

C.	Full Name (Last, First, Middle Initial) David Serviansky	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 7920 Los Pinos Blvd.	Transaction ID: SA11AI.4975
	City State Zip Code Coral Gables FL 33143-6467	Amount of Each Receipt this Period 1250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Landstar Real Estate Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1250.00	

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 11 / 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Dennis Wald

Mailing Address 1320 S. Dixie Highway #450

City State Zip Code
Miami FL 33146

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

Name of Employer Occupation
Wald Stafford & Wald Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4974

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Bernard Wolfson

Mailing Address 3165 Via Abitare

City State Zip Code
Coconut Grove FL 33133

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

Name of Employer Occupation
Hospitality Operations, Inc. Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2009

Transaction ID: SA11AI.4984

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

28250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 15

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Federal Election Commission

Mailing Address 999 E Street NW

City Washington State DC Zip Code 20463

Purpose of Disbursement
Late Filing Fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5031

Date of Disbursement

08 / 12 / 2009

Amount of Each Disbursement this Period

1875.00

SUBTOTAL of Disbursements This Page (optional) ▶

1875.00

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

1875.00

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Boyd For Congress</p> <p>Mailing Address P.O. Box 15703 P.O. Box 15703</p> <p>City Tallahassee State FL Zip Code 32317</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" 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: FL District: 02</p>	<p>Transaction ID: SB23.4995 Date of Disbursement: 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Russ Feingold</p> <p>Mailing Address United States Senate</p> <p>City Washington State DC Zip Code 20515</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" 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: WI District:</p>	<p>Transaction ID: SB23.4997 Date of Disbursement: 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE</p> <p>Mailing Address 313 C STREET NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" 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: NY District: 00</p>	<p>Transaction ID: SB23.5001 Date of Disbursement: 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Alcee Hastings</p> <p>Mailing Address US. House of Representatives</p> <p>City Washington State DC Zip Code 20515</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4998 Date of Disbursement: 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period <input type="text" value="5000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Ileana Ross-Lehtinen</p> <p>Mailing Address U.S. House of Representatives</p> <p>City Washington State DC Zip Code 20515</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.4994 Date of Disbursement: 10 / 06 / 2009</p> <p>Amount of Each Disbursement this Period <input type="text" value="5000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Debbie Wasserman-Schultz</p> <p>Mailing Address 1725 Main Street</p> <p>City Weston State FL Zip Code 33326</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5000 Date of Disbursement: 11 / 23 / 2009</p> <p>Amount of Each Disbursement this Period <input type="text" value="5000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Sun Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ron Wyden

Transaction ID: SB23.4999

Date of Disbursement

Mailing Address United States Senate

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	9

City State Zip Code
Washington DC 20515

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OR District:

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

32500.00
