

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

03 APR 18 PM 1:57

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Bill Nelson for U.S. Senate Campaign Committee

ADDRESS (number and street)

500 Red Sail Way

Check if different than previously reported. (ACC)

Satellite Beach

FL

32937

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00344051

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01 01 2003

through

03 31 2003

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 Peggy Gagnon

Signature of Treasurer ~~Electronically Filed By~~ Peggy Gagnon

Peggy Gagnon

04 09 2003

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Bill Nelson for U.S. Senate Campaign Committee

Report Covering the Period:

From:

MM	DD	YYYY
01	01	2003

To:

MM	DD	YYYY
03	31	2003

	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(a))...	79729.90	1668226.68
(b) Total Contribution Refunds (from Line 20(d))...	0.00	15575.50
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	79729.90	1652651.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)...	65276.01	712549.57
(b) Total Offsets to Operating Expenditures (from Line 14)...	23.72	13515.78
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	65252.29	699033.79
8. Cash on Hand at Close of Reporting Period (from Line 27)...	925076.66	
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 02/2003)

Page 3

Write or Type Committee Name
Bill Nelson for U.S. Senate Campaign Committee

Report Covering the Period: From:

M	M	D	Y	Y	Y	Y
0	1	0	1	2	0	0

 2003 To:

M	M	D	Y	Y	Y	Y
0	3	3	1	2	0	0

 2003

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	62089.90	
(i) Itemized (use Schedule A)...	2140.00	
(ii) Unitemized.....		
(iii) TOTAL of contributions from individuals... ▶	64229.90	1129076.71
	0.00	0.00
(b) Political Party Committees...		
(c) Other Political Committees (such as PACS)...	15500.00	539149.97
	0.00	0.00
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	79729.90	1668226.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES...	0.00	6515.68
13. LOANS		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
	0.00	0.00
(b) All Other Loans...		
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...	23.72	13515.78
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1158.49	6250.66
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... ▶	80912.11	1694508.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	65276.01	712549.57
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES...	0.00	30000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	100000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	100000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	4575.50
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	11000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	15575.50
21. OTHER DISBURSEMENTS.....	0.00	1084.83
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	65276.01	859209.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	909440.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	80912.11
25. SUBTOTAL (add Line 23 and Line 24)...	990352.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	65276.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	925076.66

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 5 / 76

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Amer. Superseed Growers Assn. PAC

Mailing Address **Ms. Ruthann Geib**
1156 - 15th St., NW, #1101

City **Washington** State **DC** Zip Code **20006-1704**

FEC ID number of contributing federal political committee: **C00187684**

Name of Employer _____ Occupation _____

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
03 / 28 / 2003

Transaction ID: 0330200356C22477

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

B. Full Name (Last, First, Middle Initial)
Atlantic Marine Inc. PAC

Mailing Address **Mr. Herchel Vinyard**
8500 Heckscher Dr.

City **Jacksonville** State **FL** Zip Code **32226**

FEC ID number of contributing federal political committee: **C00232264**

Name of Employer _____ Occupation _____

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 19 / 2003

Transaction ID: 0327200352C22460

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

C. Full Name (Last, First, Middle Initial)
Atlantic Marine Inc. PAC

Mailing Address **Mr. Herchel Vinyard**
8500 Heckscher Dr.

City **Jacksonville** State **FL** Zip Code **32226**

FEC ID number of contributing federal political committee: **C00232264**

Name of Employer _____ Occupation _____

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
03 / 19 / 2003

Transaction ID: 0327200352C22481

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Boeing PAC		Date of Receipt 03 / 19 / 2003 Transaction ID: 0327200352C22451	
Mailing Address Mr. Rudy DeLeon 1200 Wilson Blvd.		Amount of Each Receipt this Period 2000.00	
City Arlington	State VA	Zip Code 22209	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00142711			
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Aggregate Year-to-Date ▼ 4000.00	
B. Full Name (Last, First, Middle Initial) DRS Technologies, Inc. PAC		Date of Receipt 03 / 27 / 2003 Transaction ID: 0327200352C22471	
Mailing Address Mr. Steve Askey 1215 Jefferson Davis Highway, #100		Amount of Each Receipt this Period 1000.00	
City Arlington	State VA	Zip Code 22202	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00275123			
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Aggregate Year-to-Date ▼ 6000.00	
C. Full Name (Last, First, Middle Initial) ECKPAC - Eckard Corp. PAC		Date of Receipt 02 / 20 / 2003 Transaction ID: 0327200352C22390	
Mailing Address P.O. Box 4689		Amount of Each Receipt this Period 1000.00	
City Clearwater	State FL	Zip Code 33758	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00041558			
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		4000.00	
TOTAL This Period (last page this line number only)			

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
FMA PAC

Mailing Address Mr. Paul Magliocchetti
1755 Jefferson Davis Highway, #110

City State Zip Code
Arlington VA 22202-3509

FEC ID number of contributing federal political committee. **C** C00280321

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 19 / 2003

Transaction ID: 0327200352C22442

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))

B. Full Name (Last, First, Middle Initial)
Providence Healthcare PAC

Mailing Address 105 Westwood Place, Suite 400

City State Zip Code
Brentwood TN 37027-5076

FEC ID number of contributing federal political committee. **C** C00344051

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 20 / 2003

Transaction ID: 0327200352C22411

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))

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

Mailing Address Mr. Joseph R. Augustus
459 East 18th St.

City State Zip Code
Jacksonville FL 32206

FEC ID number of contributing federal political committee. **C** C00312785

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
03 / 19 / 2003

Transaction ID: 0327200352C22458

Amount of Each Receipt this Period
3000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))

SUBTOTAL of Receipts This Page (optional) ▶

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

5000.00

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 8 / 78	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Bill Nelson for U.S. Senate Campaign Committee

A. Swisher PAC

Full Name (Last, First, Middle Initial)
Mailing Address Mr. Joseph R. Augustus
459 East 18th St.
City Jacksonville State FL Zip Code 32206

FEC ID number of contributing federal political committee: **C: D00312785**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8000.00

Date of Receipt
03 | 19 | 2003

Transaction ID: 0327200352C22459

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

B. Textron Inc PAC

Full Name (Last, First, Middle Initial)
Mailing Address Mr. Richard Smith
P.O. Box 878
City Providence State RI Zip Code 02901

FEC ID number of contributing federal political committee: **C: C00123612**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 | 29 | 2003

Transaction ID: 0330200356C22481

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	15500.00

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 9 / 78	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. John S. Anderegg, Jr.

Mailing Address: Dynamics Research Corporation
60 Frontage Road

City: Andover State: MA Zip Code: 01810

FEC ID number of contributing federal political committee: C

Name of Employer: Dynamics Research Corporation Occupation: Chairman Emeritus

Receipt For: 2006
 Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 | 19 | 2003

Transaction ID: 0327200352C22439

Amount of Each Receipt this Period
1000.00

Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Douglas W. Armstrong

Mailing Address: 7615 Rustle Ridge Court

City: Fairfax Station State: VA Zip Code: 22039

FEC ID number of contributing federal political committee: C

Name of Employer: Electronic Warfare Associates Occupation: Sr. Vice President

Receipt For: 2006
 Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 | 19 | 2003

Transaction ID: 0327200352C22449

Amount of Each Receipt this Period
1000.00

Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Jeanelle D. Arvie

Mailing Address: 113 Heron Lake Way

City: Ponte Vedra Beach State: FL Zip Code: 32082

FEC ID number of contributing federal political committee: C

Name of Employer: Swisher International, Inc. Occupation: Senior Vice President

Receipt For: 2006
 Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 | 19 | 2003

Transaction ID: 0327200352C22457

Amount of Each Receipt this Period
1000.00

Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

 Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Mr. Joseph R. Augustus		Date of Receipt 03 / 19 / 2003 Transaction ID: 0327200352C22458	
Mailing Address 4550 Ortega Forrest Dr.		Amount of Each Receipt this Period 1000.00	
City Jacksonville	State FL	Zip Code 32210-8131	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(j)(441a-1)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1000.00	
Name of Employer Swisher International, Inc.		Occupation Sr. Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date 1000.00	
B. Full Name (Last, First, Middle Initial) Ms. Cheryl Barber		Date of Receipt 01 / 20 / 2003 Transaction ID: 0129200352C22375	
Mailing Address P.O. Box 838, Carey Barber Rkoad		Amount of Each Receipt this Period 250.00	
City Macclenny	State FL	Zip Code 32053-	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(j)(441a-1)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00	
Name of Employer Homemaker		Occupation Homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date 250.00	
C. Full Name (Last, First, Middle Initial) Ms. Susan Barron		Date of Receipt 02 / 20 / 2003 Transaction ID: 0327200352C22406	
Mailing Address 243 Honeysuckle Dr.		Amount of Each Receipt this Period 500.00	
City Jupiter	State FL	Zip Code 33458-	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(j)(441a-1)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00	
Name of Employer Arise Foundation		Occupation Co-Founder	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional)		1750.00	
TOTAL This Period (last page this line number only)		1750.00	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. James L. Berger

Mailing Address 1409 Ponca De Leon Drive

City State Zip Code
Fort Lauderdale FL 33316

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

Name of Employer Occupation
Berger, Davis & Singerman Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 20 2003

Transaction ID: 0129200352C22369

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))

B. Full Name (Last, First, Middle Initial)
Mr. Lloyd C. Berger

Mailing Address 824 SE 8th Street

City State Zip Code
Fort Lauderdale FL 33301

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

Name of Employer Occupation
Berger Realty Company Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 20 2003

Transaction ID: 0129200352C22371

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))

C. Full Name (Last, First, Middle Initial)
Mr. Mitchell W. Berger

Mailing Address 7121 NW 65th Terrace

City State Zip Code
Parkland FL 33067

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

Name of Employer Occupation
Berger, Davis & Singerman Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 20 2003

Transaction ID: 0129200352C22370

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))

SUBTOTAL of Receipts This Page (optional) ▶

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

3000.00

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 / 75

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Ignie N. Bergeron

Mailing Address 20400 SW 51st St.

City State Zip Code
Fort Lauderdale FL 33332-1565

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

Name of Employer Occupation
Bergeron Land Development Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 03 / 2003

Transaction ID: 0327200352C22424

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Bergeron, Sr.

Mailing Address 19612 SW 89th Place

City State Zip Code
Fort Lauderdale FL 33332-

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

Name of Employer Occupation
Bergeron Land Development Developer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 03 / 2003

Transaction ID: 0327200352C22431

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Munsy L. Bame

Mailing Address 14745 Draft Horse Lane

City State Zip Code
West Palm Beach FL 33414-

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt
03 / 03 / 2003

Transaction ID: 0327200352C22417

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) **1600.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 of 78
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. LaVame Burton

Mailing Address 4296 Buckskin Lake Dr.

City State Zip Code
Ellicott City MD 21042

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

Name of Employer Occupation
Pharmaceutical Care Mgmt Assoc President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2003

Transaction ID: 0327200352C22412

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Ms. Concepcion Cabezas

Mailing Address 186 St. Croix Ave.

City State Zip Code
Cocoa Beach FL 32931-3335

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2003

Transaction ID: 0327200352C22421

Amount of Each Receipt this Period
133.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Joe L. Davis, Jr.

Mailing Address Post Office Box 516

City State Zip Code
Wauchula FL 33873

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

Name of Employer Occupation
Self Employed Agriculture

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1724.90

Date of Receipt
MM / DD / YYYY
02 / 07 / 2003

Transaction ID: 0327200352C22437

Amount of Each Receipt this Period
1224.90

In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1857.90

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 / 76

(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)

Bill Nelson for U.S. Senate Campaign Committee

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

Mailing Address P.O. Box 4730

City State Zip Code
Santa Rosa Beach FL 32450-

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

Name of Employer Occupation
Seaside Community Dev. Co. Developer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

01 20 2003

Transaction ID: 0129200352C22378

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Thomas A. Davis

Mailing Address 1455 Pennsylvania Ave., NW, #1200

City State Zip Code
Washington DC 20004-

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

Name of Employer Occupation
Davis & Harman Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

01 20 2003

Transaction ID: 0129200352C22378

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Gary M. Doncher

Mailing Address 1837 Donald Street

City State Zip Code
Jacksonville FL 32205-

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

Name of Employer Occupation
Analysis, Design & Diagnostics President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

03 19 2003

Transaction ID: 0327200352C22444

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Ms. Anita R. Estell		Date of Receipt MONTH / DAY / YEAR 02 / 20 / 2003	
Mailing Address 688 Glebe Rd.		Transaction ID: 0327200352C22410	
City Alexandria	State VA	Zip Code 22305	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A-1))	
Name of Employer Van Scoyoc Associates, Inc.	Occupation Vice President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
B. Full Name (Last, First, Middle Initial) Mr. Robert R. Feagin, III		Date of Receipt MONTH / DAY / YEAR 02 / 20 / 2003	
Mailing Address P.O. Box B10		Transaction ID: 0327200352C22385	
City Tallahassee	State FL	Zip Code 32302	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A-1))	
Name of Employer Holland & Knight	Occupation Attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
C. Full Name (Last, First, Middle Initial) Mr. William Ferguson, Jr.		Date of Receipt MONTH / DAY / YEAR 02 / 20 / 2003	
Mailing Address 1130 Connecticut Ave., NW, Ste. 3D		Transaction ID: 0327200352C22409	
City Washington	State DC	Zip Code 20036-3881	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A-1))	
Name of Employer The Ferguson Group	Occupation CEO		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)		2100.00	
TOTAL This Period (last page this line number only)		2100.00	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 18 / 78	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Miss Austin Foman

Mailing Address P.O. Box 640

City State Zip Code
Fort Lauderdale FL 33302-0640

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

Name of Employer Occupation
American Marketing Real estate

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 03 2003

Transaction ID: 0327200352C22428

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Mrs. Christina Foman

Mailing Address P.O. Box 640

City State Zip Code
Fort Lauderdale FL 33302-0640

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

Name of Employer Occupation
American Marketing Personnel Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 03 2003

Transaction ID: 0327200352C22427

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Jennifer Foman

Mailing Address 2626 NE 16th St.

City State Zip Code
Fort Lauderdale FL 33304

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 03 2003

Transaction ID: 0327200352C22429

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 / 76

(check only one)

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

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NAME OF COMMITTEE (in Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Mr. Mues A. Forman, II Mailing Address 888 SE 3rd Ave., #501 City State Zip Code Fort Lauderdale FL 33316-		Date of Receipt 03 / 03 / 2003 Transaction ID: 0327200352C22426 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)
Name of Employer Occupation Los Milos Productions Film Maker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) Ms. Vera Ruth Freshure Mailing Address 615 E. New Haven Ave., Apt. 308 City State Zip Code Melbourne FL 32901-5467 FEC ID number of contributing federal political committee. C		Date of Receipt 03 / 29 / 2003 Transaction ID: 0330200356C22476 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)
Name of Employer Occupation Retired Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 245.00		
C. Full Name (Last, First, Middle Initial) Mr. Richard B. Friedst Mailing Address 3090 Cobb Hill Lane City State Zip Code Oakton VA 22124 FEC ID number of contributing federal political committee. C		Date of Receipt 03 / 19 / 2003 Transaction ID: 0327200352C22450 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)
Name of Employer Occupation Electronic Warfare Associates Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional)		2050.00
TOTAL This Period (last page this line number only)		

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 18 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Ms. Anastasia M. Garcia

Mailing Address 234 Antiquera Ave., Apt. 6

City State Zip Code
Coral Gables FL 33134

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

Name of Employer
Villanueva, Garcia & Gur-
an

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1232.00

Date of Receipt
03 07 2003

Transaction ID: 0327200352C22436

Amount of Each Receipt this Period
1232.00

In-Kind
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Ira Gerstein

Mailing Address 2405 Okeechobee Blvd.

City State Zip Code
West Palm Beach FL 33409

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

Name of Employer
Top Hat Car Wash

Occupation
Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 20 2003

Transaction ID: 0327200352C22388

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Peter J. Ghione

Mailing Address 24434 Moss Creek Lane

City State Zip Code
Ponte Vedra Beach FL 32082-2141

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

Name of Employer
Swisher International, In-
c.

Occupation
Sr. Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 19 2003

Transaction ID: 0327200352C22454

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2482.00

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER		PAGE 19 / 78	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Clifford S. Gibbons

Mailing Address 940 South Sterling Ave.

City State Zip Code
Tampa FL 33629

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Gibbons & Company, Inc. President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 20 / 2008

Transaction ID: 0327200352C22408

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Robert J. Grace, Jr.

Mailing Address 40 Columbia Dr.

City State Zip Code
Tampa FL 33608-3538

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Stiles, Taylor & Grace Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
02 / 20 / 2008

Transaction ID: 0327200352C22399

Amount of Each Receipt this Period
100.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Kaylene H. Green

Mailing Address Crystal Square 5
1755 Jefferson Davis Highway, #110

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The PMA Group Principle

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 19 / 2008

Transaction ID: 0327200352C22443

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)1a-1)

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 20 of 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Mr. Carl N. Guenard		Date of Receipt 03 19 2003	
Mailing Address 10102 Holland Court		Transaction ID: 0327200352C22438	
City Manassas	State VA	Zip Code 20110-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))	
Name of Employer Electronic Warfare Associates	Occupation Executive		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
B. Full Name (Last, First, Middle Initial) Mr. Jack B. Guidry		Date of Receipt 03 19 2003	
Mailing Address 12912 Huntley Manor Dr.		Transaction ID: 0327200352C22466	
City Jacksonville	State FL	Zip Code 32224-	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))	
Name of Employer W & O Supply, Inc.	Occupation Vice President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
C. Full Name (Last, First, Middle Initial) Ms. Audrey Horne		Date of Receipt 02 20 2003	
Mailing Address 3 Williamsburg Circle		Transaction ID: 0327200352C22383	
City Whealing	State WV	Zip Code 26003-	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))	
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
SUBTOTAL of Receipts This Page (optional)		1750.00	
TOTAL This Period (last page this line number only)			

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. <u>Hunton & Williams</u>		Date of Receipt MM/DD/YYYY 03/31/2008
Mailing Address <u>Mr. C. King Mallory, III</u> <u>1900 K Street, NW</u>		Transaction ID: <u>D4072D0341C22778</u>
City <u>Washington</u>	State <u>DC</u>	Zip Code <u>20008-1109</u>
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>1000.00</u>
Name of Employer <u>Hunton & Williams</u>	Occupation <u>Attorney</u>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>1000.00</u>	

Full Name (Last, First, Middle Initial) B. <u>Mr. R. K. Jones</u>		Date of Receipt MM/DD/YYYY 03/19/2008
Mailing Address <u>2844 Evercharm Place</u>		Transaction ID: <u>0327200352C22465</u>
City <u>Jacksonville</u>	State <u>FL</u>	Zip Code <u>32257-</u>
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>500.00</u>
Name of Employer <u>Moseley, Warren Prichard et al</u>	Occupation <u>Attorney</u>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>500.00</u>	

Full Name (Last, First, Middle Initial) C. <u>Mr. Stanley Karnor</u>		Date of Receipt MM/DD/YYYY 01/20/2008
Mailing Address <u>3845 LaVista Circle</u>		Transaction ID: <u>0129200352C22377</u>
City <u>Jacksonville</u>	State <u>FL</u>	Zip Code <u>32217-</u>
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>250.00</u>
Name of Employer <u>First Coast Supply, Inc.</u>	Occupation <u>Executive</u>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>250.00</u>	

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 22 / 76

(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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Edwin C. Kruger

Mailing Address 172 Bob White Court

City State Zip Code
Daytona Beach FL 32119-8300

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
03 19 2003

Transaction ID: 0327200352C22447

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

B. Full Name (Last, First, Middle Initial)
Ms. LeWanna R. Kruger

Mailing Address 172 Bob White Court

City State Zip Code
Daytona Beach FL 32119-8300

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
03 19 2003

Transaction ID: 0327200352C22448

Amount of Each Receipt this Period
2000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

C. Full Name (Last, First, Middle Initial)
Mr. Richard K. Landreghn

Mailing Address 13690 Bromley Point Dr.

City State Zip Code
Jacksonville FL 32225

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

Name of Employer Occupation
York International sales rep

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 29 2003

Transaction ID: 0330200356C22479

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional) ▶

4500.00

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 23 / 76

(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

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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Stephen M. Leggett

Mailing Address 1295 Eagle Bend Court

City State Zip Code
Jacksonville FL 32226

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

Name of Employer Occupation
Milestone Carlos Contract- Contractor
ing

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 20 2003

Transaction ID: 0129200352C22379

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

B. Full Name (Last, First, Middle Initial)
Ms. Nancy K. Magliocchetti

Mailing Address 10203 Woodvale Pond Dr.

City State Zip Code
Fairfax Station VA 22039

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 19 2003

Transaction ID: 0327200352C22440

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Paul J. Magliocchetti

Mailing Address 10203 Woodvale Pond Dr.

City State Zip Code
Fairfax Station VA 22039

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

Name of Employer Occupation
The PMA Group Principle

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 19 2003

Transaction ID: 0327200352C22441

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 24 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Ms. Lori Marcellino

Mailing Address 651 Palm Trace Dr., Apt. 307

City State Zip Code
Davie FL 33314-

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 03 2003

Transaction ID: 0327200352C22430

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Michael E. Marcone

Mailing Address 909 Poinciana Dr.

City State Zip Code
Fort Lauderdale FL 33301-

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

Name of Employer Info Requested Occupation Info Requested
Auto Nation Inc. President/CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 03 2003

Transaction ID: 0327200352C22426

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Raul Masvidal

Mailing Address 1401 Ponce de Leon Boulevard #402

City State Zip Code
Coral Gables FL 33134-

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

Name of Employer Info Requested Occupation Info Requested
Masvidal Partners Managing Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 20 2003

Transaction ID: 0128200352C22366

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) ▶

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

3000.00

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 25 / 76

(check only one)

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

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NAME OF COMMITTEE (in Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Mr. Brian May		Date of Receipt MONTH DAY YEAR 03 03 2003	
Mailing Address 930 Malaga Ave.		Transaction ID: 0327200352C22434	
City Miami	State FL	Zip Code 33134-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		<input checked="" type="checkbox"/>	
Name of Employer Barreto, Cunningham, May		Occupation Government Affairs	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	
Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)			

B. Full Name (Last, First, Middle Initial) Mr. Brian May		Date of Receipt MONTH DAY YEAR 03 03 2003	
Mailing Address 930 Malaga Ave.		Transaction ID: 0327200352C22435	
City Miami	State FL	Zip Code 33134-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		<input checked="" type="checkbox"/>	
Name of Employer Barreto, Cunningham, May		Occupation Government Affairs	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	
Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)			

C. Full Name (Last, First, Middle Initial) Mrs. Jenny May		Date of Receipt MONTH DAY YEAR 03 03 2003	
Mailing Address 930 Malaga Ave.		Transaction ID: 0327200352C22433	
City Miami	State FL	Zip Code 33134-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		<input checked="" type="checkbox"/>	
Name of Employer Montgomery Watson		Occupation Biologist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	
Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)			

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 26 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mrs. Jenny May

Mailing Address 930 Malaga Ave.

City State Zip Code
Miami FL 33134

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

Name of Employer
Montgomery Watson

Occupation
Biologist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
03 / 03 / 2003

Transaction ID: 0327200352C22432

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

B. Full Name (Last, First, Middle Initial)
Mr. Jarold L. Miller

Mailing Address 826 Mount Vernon Ave.

City State Zip Code
Portsmouth VA 23707-2023

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

Name of Employer
Earl Industries, LLC

Occupation
President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 19 / 2003

Transaction ID: 0327200352C22468

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

C. Full Name (Last, First, Middle Initial)
Mr. Charles E. Millon

Mailing Address 4151 Paloma Point Court

City State Zip Code
Jacksonville FL 32217

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

Name of Employer
SPI

Occupation
Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 19 / 2003

Transaction ID: 0327200352C22462

Amount of Each Receipt this Period
250.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 27 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Ms. Teala Milton		Date of Receipt 03 / 19 / 2003	
Mailing Address 4151 Palma Point Court		Transaction ID: 0327200352C22463	
City Jacksonville	State FL	Zip Code 32217-	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee.		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(3))	
Name of Employer Citigroup	Occupation Government Affairs		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
B. Full Name (Last, First, Middle Initial) Ms. Kala A. Murphy		Date of Receipt 03 / 20 / 2003	
Mailing Address 800 Riviera Isle		Transaction ID: 0129200352C22373	
City Fort Lauderdale	State FL	Zip Code 33301-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(3))	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
C. Full Name (Last, First, Middle Initial) Ms. Kerr M. Murphy		Date of Receipt 03 / 20 / 2003	
Mailing Address University of Notre Dame		Transaction ID: 0129200352C22374	
City Notre Dame	State IN	Zip Code 46556-	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(3))	
Name of Employer University of Notre Dame	Occupation Student		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)		2250.00	
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 28 / 76

(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)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Mr. William M. Murphy		Date of Receipt 01 / 20 / 2003
Mailing Address 800 Riviera Isle		Transaction ID: 0129200352C22372
City Fort Lauderdale	State FL	Zip Code 33301-2822
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Douglas Management	Occupation Real estate	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mr. John Newcomer		Date of Receipt 02 / 20 / 2003
Mailing Address 715 S. Newport Ave.		Transaction ID: 0327200352C22388
City Tampa	State FL	Zip Code 33606-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer James Hoyer, Newcomer, Florida	Occupation Attorney	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Newcomer		Date of Receipt 02 / 20 / 2003
Mailing Address 715 S. Newport Ave.		Transaction ID: 0327200352C22387
City Tampa	State FL	Zip Code 33606-2832
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Hillsborough County	Occupation Benefits Manager	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 / 76

(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)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Blake T. Newton, III

Mailing Address P.O. Box 237

City State Zip Code
Garrison NY 10524-

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

Name of Employer Swisher International, Inc. Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2003

Transaction ID: 0327200352C22455

Amount of Each Receipt this Period
1000.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(j)(41a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Joseph J. O'Connor

Mailing Address 1543 Main Street

City State Zip Code
Havana FL 32333-

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

Name of Employer Earl Industries, LLC Occupation General Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2003

Transaction ID: 0330200356C22480

Amount of Each Receipt this Period
500.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(j)(41a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Mina Lisa S. Odle

Mailing Address 16834 N. 82nd Place

City State Zip Code
Scottsdale AZ 85254-

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 20 / 2003

Transaction ID: 0327200352C22413

Amount of Each Receipt this Period
332.00

Receipt
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(j)(41a-1)

SUBTOTAL of Receipts This Page (optional)	1832.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 30 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Mr. Stephen J. Pajcic, III

Mailing Address 1917 Montgomery Place

City State Zip Code
Jacksonville FL 32205-9319

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

Name of Employer Pajcic & Pajcic Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 20 / 2003

Transaction ID: 0129200352C22367

Amount of Each Receipt this Period
1000.00

Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Stephen J. Pajcic, III

Mailing Address 1917 Montgomery Place

City State Zip Code
Jacksonville FL 32205-9319

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

Name of Employer Pajcic & Pajcic Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 20 / 2003

Transaction ID: 0129200352C22368

Amount of Each Receipt this Period
1000.00

Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

C. Full Name (Last, First, Middle Initial)
Mr. George Hall

Mailing Address 1771 SE 9th St.

City State Zip Code
Fort Lauderdale FL 33316

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

Name of Employer Shutts & Bowen LLP Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2003

Transaction ID: 0327200352C22422

Amount of Each Receipt this Period
300.00

Receipt
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) **2300.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 31 / 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. Ms. Lisa Young Rath

Mailing Address 9DB Lake Otis Dr., North

City

Winter Haven

State

FL

Zip Code

33890

FEC ID number of contributing federal political committee.

C

Name of Employer
Florida Citrus Processors
AssnOccupation
Executive

Receipt For: 2008

 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 20 / 2008

Transaction ID: 0129200352C22364

Amount of Each Receipt this Period

500.00

Receipt

 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Ralph A. Rockow

Mailing Address 501 W. Moon Valley Dr.

City

Phoenix

State

AZ

Zip Code

85023

FEC ID number of contributing federal political committee.

C

Name of Employer
Dynamic Science, Inc.Occupation
President

Receipt For: 2008

 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

MM / DD / YYYY
02 / 20 / 2008

Transaction ID: 0327200352C22415

Amount of Each Receipt this Period

334.00

Receipt

 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Bernard Schwartz

Mailing Address 600 Third Ave.

City

New York

State

NY

Zip Code

10016

FEC ID number of contributing federal political committee.

C

Name of Employer
Loral Space & Comm. Ltd.Occupation
CEO

Receipt For: 2008

 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
03 / 27 / 2008

Transaction ID: 0327200352C22472

Amount of Each Receipt this Period

2000.00

Receipt

 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2834.00

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 32 / 78

(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Mr. Donald R. Sell		Date of Receipt 03 / 19 / 2003
Mailing Address 4138 Stowe Run Lane		Transaction ID: 0327200352C22488
City Jacksonville	State FL	Zip Code 32225-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Ameri-Force	Occupation Vice President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Matthew J. Sell		Date of Receipt 03 / 19 / 2003
Mailing Address 8175 Woodpecker Trail		Transaction ID: 0327200352C22467
City Jacksonville	State FL	Zip Code 32256-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Info Requested	Occupation Info Requested	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Edward J. Shashen, Jr.		Date of Receipt 03 / 19 / 2003
Mailing Address 802 Luzerne St.		Transaction ID: 0327200352C22445
City Johnstown	State PA	Zip Code 15005-2349
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Concurrent Technologies Corp.	Occupation Vice President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶

2000.00

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

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

 Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. Mr. David L. Stout

Mailing Address 1026 E. Monte Cristo

 City State Zip Code
 Phoenix AZ 85022-

FEC ID number of contributing federal political committee.

C

Name of Employer
Dynamic Science, Inc.Occupation
Executive
 Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

MM/DD/YYYY
02/20/2003

Transaction ID: 0327200352C22414

Amount of Each Receipt this Period

334.00

Receipt

 Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)(1a-1))

Full Name (Last, First, Middle Initial)

B. Mr. Bruce Strayhorn

Mailing Address 2125 First St. Suite 200
P.O. Box 1288
 City State Zip Code
 Ft. Myers FL 33902-

FEC ID number of contributing federal political committee.

C

Name of Employer
Strayhorn & StrayhornOccupation
Attorney
 Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

MM/DD/YYYY
01/20/2003

Transaction ID: 0129200352C22385

Amount of Each Receipt this Period

1000.00

Receipt

 Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)(1a-1))

Full Name (Last, First, Middle Initial)

C. Ms. Sandra K. Welch

Mailing Address 5834 Robins Nest Lane

 City State Zip Code
 Burke VA 22015-3118

FEC ID number of contributing federal political committee.

C

Name of Employer
Paul Magliocchetti Associ-
atesOccupation
Associate
 Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

MM/DD/YYYY
03/19/2003

Transaction ID: 0327200352C22446

Amount of Each Receipt this Period

1000.00

Receipt

 Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional)

2334.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial) Mr. Thomas G. Wolf		Date of Receipt MONTH DAY YEAR 02 20 2003	
Mailing Address 709 Guisando De Avila		Transaction ID: 0327200352C22403	
City State Zip Code Tampa FL 33613	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer Entrepreneurs Source	Occupation CEO		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) Mr. James Woodside		Date of Receipt MONTH DAY YEAR 02 20 2003	
Mailing Address 902 Guisando De Avila		Transaction ID: 0327200352C22396	
City State Zip Code Tampa FL 33613	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer Self Employed	Occupation Investor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
C. Full Name (Last, First, Middle Initial) Mr. Peter Zinober		Date of Receipt MONTH DAY YEAR 02 20 2003	
Mailing Address 1501 Bayshore Blvd.		Transaction ID: 0327200352C22398	
City State Zip Code Tampa FL 33608	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer Zinober & McCrea, P.A.	Occupation Attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (optional)		850.00	
TOTAL This Period (last page this line number only)		62089.80	

**SCHEDULE A (FEC Form F3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. SunTrust

Mailing Address P.O. Box 3926

City State Zip Code
Tallahassee FL 32315-3926

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5504.89

Date of Receipt

01 31 2003

Transaction ID: 0327200352C22381

Amount of Each Receipt this Period
412.72

Interest Received

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))

Full Name (Last, First, Middle Initial)

B. SunTrust

Mailing Address P.O. Box 3926

City State Zip Code
Tallahassee FL 32315-3926

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5872.41

Date of Receipt

02 28 2003

Transaction ID: 0327200322C22475

Amount of Each Receipt this Period
367.52

Interest Received

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))

Full Name (Last, First, Middle Initial)

C. SunTrust

Mailing Address P.O. Box 3926

City State Zip Code
Tallahassee FL 32315-3926

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6250.88

Date of Receipt

03 31 2003

Transaction ID: 0407200340C22482

Amount of Each Receipt this Period
376.25

Interest Received

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1)-(1))

SUBTOTAL of Receipts This Page (optional) ▶

1158.49

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

1158.49

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. AT&T		Transaction ID: 0114200337E3972 Date of Disbursement 01 / 01 / 2003
Mailing Address Post Office Box 8220		Amount of Each Disbursement this Period 49.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aurora	State IL Zip Code 60572-8220	
Purpose of Disbursement	Phone	PHONE
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Transaction ID: 0129200353E4019 Date of Disbursement 01 / 24 / 2003
Mailing Address Post Office Box 8220		Amount of Each Disbursement this Period 39.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aurora	State IL Zip Code 60572-8220	
Purpose of Disbursement	Phone	PHONE
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: 0327200353E4054 Date of Disbursement 02 / 22 / 2003
Mailing Address Post Office Box 8220		Amount of Each Disbursement this Period 40.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aurora	State IL Zip Code 60572-8220	
Purpose of Disbursement	Phone	PHONE
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	129.88
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. AT&T		Transaction ID: 0327200353E4098 Date of Disbursement 03 / 20 / 2003
Mailing Address Post Office Box 8220		Amount of Each Disbursement this Period 41.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aurora State IL Zip Code 60572-8220	PHONE	
Purpose of Disbursement Phone		001 Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Atlantic Business Systems		Transaction ID: 0118200333E3991 Date of Disbursement 01 / 17 / 2003
Mailing Address 1490 Highway A1A		Amount of Each Disbursement this Period 228.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Satellite Beach State FL Zip Code 32937	EQUIPMENT REPAIR	
Purpose of Disbursement Equipment Repair		001 Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. BellSouth		Transaction ID: 0114200337E3986 Date of Disbursement 01 / 14 / 2003
Mailing Address P.O. Box 70807		Amount of Each Disbursement this Period 52.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Charlotte State NC Zip Code 28272-0807	PHONE	
Purpose of Disbursement Phone		001 Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶ 322.52

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

**SCHEDULE B (FEC Form F3)
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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. BellSouth

Mailing Address P.O. Box 70807

City	State	Zip Code
Charlotte	NC	28272-0807

Purpose of Disbursement

Phone

Candidate Name

 DD1
Category
Type

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

State: District:

Disbursement For:

 Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4048

Date of Disbursement

02 / 10 / 2003

Amount of Each Disbursement this Period

41.71

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE

Full Name (Last, First, Middle Initial)

B. BellSouth

Mailing Address P.O. Box 70807

City	State	Zip Code
Charlotte	NC	28272-0807

Purpose of Disbursement

Phone

Candidate Name

 DD1
Category
Type

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

State: District:

Disbursement For:

 Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4084

Date of Disbursement

03 / 10 / 2003

Amount of Each Disbursement this Period

83.93

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE

Full Name (Last, First, Middle Initial)

C. Capital Associates

Mailing Address Mr. Bob Fermer
426 - C Street NE

City	State	Zip Code
Washington	DC	20002-

Purpose of Disbursement

Jan. Rent

Candidate Name

 DD1
Category
Type

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

State: District:

Disbursement For:

 Primary General
 Other (specify) ▼

Transaction ID: D114200337E3976

Date of Disbursement

01 / 01 / 2003

Amount of Each Disbursement this Period

420.00

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

JAN. RENT

SUBTOTAL of Disbursements This Page (optional) ▶

545.64

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

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 39 / 78
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Capital Associates		Transaction ID: 0203200316E4039 Date of Disbursement 02 01 2003	
Mailing Address Mr. Bob Ferimer 426 - C Street NE		Amount of Each Disbursement this Period 310.00	
City Washington	State DC	Zip Code 20002-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Feb. Rent		Category/Type 001	
Candidate Name		FEB. RENT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Capital Associates		Transaction ID: 0327200353E4056 Date of Disbursement 02 28 2003	
Mailing Address Mr. Bob Ferimer 426 - C Street NE		Amount of Each Disbursement this Period 385.00	
City Washington	State DC	Zip Code 20002-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Mar. Rent		Category/Type 001	
Candidate Name		MAR. RENT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Joe Davis		Transaction ID: 0327200352C22437IK Date of Disbursement 02 07 2003	
Mailing Address Post Office Box 516		Amount of Each Disbursement this Period 1224.90	
City Wauchula	State FL	Zip Code 33873-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement		Category/Type	
Candidate Name		IN KIND:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1899.90
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 40 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Carol Lybrand Duffey, CPA, PA		Transaction ID: 0327200353E4080	
Mailing Address 130 Country Club Dr.		Date of Disbursement 03 / 07 / 2003	
City Titusville	State FL	Zip Code 32780-	Amount of Each Disbursement this Period 3175.00
Purpose of Disbursement Accounting Services	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		ACCOUNTING SERVICES
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) B. ElectroNet Intermedia Consulting		Transaction ID: 0203200316E4025	
Mailing Address 3411 Capital Medical Boulevard		Date of Disbursement 02 / 01 / 2003	
City Tallahassee	State FL	Zip Code 32308-	Amount of Each Disbursement this Period 30.00
Purpose of Disbursement Internet Service	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		INTERNET SERVICE
State: District:	Category/Type 004		

Full Name (Last, First, Middle Initial) C. Margaret Gagnon		Transaction ID: 0327200353E4046	
Mailing Address 500 Red Sail Way		Date of Disbursement 02 / 10 / 2003	
City Satellite Beach	State FL	Zip Code 32937-	Amount of Each Disbursement this Period 14623.00
Purpose of Disbursement Payroll	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		PAYROLL
State: District:	Category/Type 001		

SUBTOTAL of Disbursements This Page (optional)	18028.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. Margaret Gagnon

Transaction ID: 0327200353E4092

Date of Disbursement

03 / 20 / 2003

Mailing Address 500 Red Sail Way

City	State	Zip Code
Satellite Beach	FL	32937-

Amount of Each Disbursement this Period

63.06

Purpose of Disbursement
Travel

002
Category/ Type

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

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

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

Full Name (Last, First, Middle Initial)

B. Anastasia Garcia

Transaction ID: 0327200352C22436IK

Date of Disbursement

03 / 07 / 2003

Mailing Address 234 Antiquera Ave., Apt. 6

City	State	Zip Code
Coral Gables	FL	33134-

Amount of Each Disbursement this Period

1232.00

Purpose of Disbursement

Category/ Type

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

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

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

IN KIND:

Full Name (Last, First, Middle Initial)

C. Ryan Grindler

Transaction ID: 0114200337E3974

Date of Disbursement

01 / 01 / 2003

Mailing Address P.O. Box 25

City	State	Zip Code
Great Falls	VA	22066-0025

Amount of Each Disbursement this Period

1492.13

Purpose of Disbursement
Payroll

001
Category/ Type

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

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

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

SUBTOTAL of Disbursements This Page (optional)

2787.19

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form F3)
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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Ryan Grindler		Transaction ID: 0114200337E3983 Date of Disbursement M W T T F S S 0 1 0 9 2 0 0 3
Mailing Address P.O. Box 25		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Great Falls	State VA	
Zip Code 22066-0025	Purpose of Disbursement Payroll	PAYROLL
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ryan Grindler		Transaction ID: 0327200353E4042 Date of Disbursement M W T T F S S 0 2 0 1 2 0 0 3
Mailing Address P.O. Box 25		Amount of Each Disbursement this Period 928.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Great Falls	State VA	
Zip Code 22066-0025	Purpose of Disbursement Payroll	PAYROLL
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ryan Grindler		Transaction ID: 0327200353E4057 Date of Disbursement M W T T F S S 0 2 2 8 2 0 0 3
Mailing Address P.O. Box 25		Amount of Each Disbursement this Period 928.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Great Falls	State VA	
Zip Code 22066-0025	Purpose of Disbursement Payroll	PAYROLL
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2856.40
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

 FOR LINE NUMBER:
(check only one)

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20b
 19a
20c
 19b
21

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. Ryan Grindler

Transaction ID: 0327200353E4097

Date of Disbursement

03 | 20 | 2003

Mailing Address P.O. Box 25

 City State Zip Code
Great Falls VA 22065-0025

Amount of Each Disbursement this Period

27.50

Purpose of Disbursement

Travel

002

Category/
Type
 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

 Office Sought: House
 Senate
 President
State: District:

 Disbursement For:
 Primary General
 Other (specify) ▼

TRAVEL

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Transaction ID: 0327200353E4081

Date of Disbursement

03 | 07 | 2003

Mailing Address

 City State Zip Code
Ogden UT 84201-

Amount of Each Disbursement this Period

571.00

Purpose of Disbursement

Taxes

001

Category/
Type
 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

 Office Sought: House
 Senate
 President
State: District:

 Disbursement For:
 Primary General
 Other (specify) ▼

TAXES

Full Name (Last, First, Middle Initial)

C. MCI Worldcom

Transaction ID: 0114200337E3985

Date of Disbursement

01 | 14 | 2003

Mailing Address P.O. Box 856053

 City State Zip Code
Louisville KY 40285-8053

Amount of Each Disbursement this Period

122.99

Purpose of Disbursement

Phone

001

Category/
Type
 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

 Office Sought: House
 Senate
 President
State: District:

 Disbursement For:
 Primary General
 Other (specify) ▼

PHONE

SUBTOTAL of Disbursements This Page (optional) ▶

721.49

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

**SCHEDULE B (FEC Form F3)
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
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. MCI Worldcom

Mailing Address P.O. Box 856053

City	State	Zip Code
Louisville	KY	40285-6053

Purpose of Disbursement

Phone

Candidate Name

001
Category/ Type

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify) ▼	

Transaction ID: D327200353E4049

Date of Disbursement

02	10	2003
----	----	------

Amount of Each Disbursement this Period

115.08

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE

Full Name (Last, First, Middle Initial)

B. MCI Worldcom

Mailing Address P.O. Box 856053

City	State	Zip Code
Louisville	KY	40285-6053

Purpose of Disbursement

Phone

Candidate Name

001
Category/ Type

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify) ▼	

Transaction ID: 0327200353E4082

Date of Disbursement

03	07	2003
----	----	------

Amount of Each Disbursement this Period

87.30

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE

Full Name (Last, First, Middle Initial)

C. Ms. Kristal Miller

Mailing Address KLM Group
9015 Weatherly Way

City	State	Zip Code
Lorton	VA	22079-

Purpose of Disbursement

Printing

Candidate Name

003
Category/ Type

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify) ▼	

Transaction ID: 0327200353E4085

Date of Disbursement

03	10	2003
----	----	------

Amount of Each Disbursement this Period

1091.38

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PRINTING

SUBTOTAL of Disbursements This Page (optional) ▶

1273.76

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

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Ms. Kristal Miller

Full Name (Last, First, Middle Initial)
Ms. Kristal Miller

Transaction ID: 0327200353E4091
Date of Disbursement
03 / 20 / 2003

Mailing Address: KLM Group
9015 Weatherly Way

City: Lorton State: VA Zip Code: 22079

Purpose of Disbursement: Printing

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period: 3633.44

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 003
PRINTING

B. Mr. Bill Nelson

Full Name (Last, First, Middle Initial)
Mr. Bill Nelson

Transaction ID: 0203200316E4032
Date of Disbursement
02 / 01 / 2003

Mailing Address: 718 Hart Senate Office Building

City: Washington State: DC Zip Code: 20510

Purpose of Disbursement: SEE BELOW

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period: 675.77

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: _____
SEE BELOW

C. American Air

Full Name (Last, First, Middle Initial)
American Air

Transaction ID: 0203200316E4034
Date of Disbursement
12 / 17 / 2002

Mailing Address: P.O. Box 619616

City: Dallas State: TX Zip Code: 75261-9612

Purpose of Disbursement: Travel

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period: 90.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 002
[MEMO ITEM]
MEMO: TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶ 4309.21

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

**SCHEDULE B (FEC Form F3)
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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Delta Airlines		Transaction ID: 0203200316E4038 Date of Disbursement 10 31 2002
Mailing Address: Hartfield International Airport		Amount of Each Disbursement this Period 268.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City: Atlanta	State: GA Zip Code: 30320-	
Purpose of Disbursement: Travel		[MEMO ITEM] MEMO: TRAVEL
Candidate Name:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Southwest Air		Transaction ID: 0203200316E4033 Date of Disbursement 12 17 2002
Mailing Address: 1715 N. West Shore Blvd.		Amount of Each Disbursement this Period 75.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City: Tampa	State: FL Zip Code: 33607-	
Purpose of Disbursement: Travel		[MEMO ITEM] MEMO: TRAVEL
Candidate Name:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. U.S. Senate Restaurant		Transaction ID: 0203200316E4035 Date of Disbursement 11 19 2002
Mailing Address: First and C Streets, NW		Amount of Each Disbursement this Period 67.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City: Washington	State: DC Zip Code: 20510-	
Purpose of Disbursement: Staff Working Dinner		[MEMO ITEM] MEMO: STAFF WORKING DINNER
Candidate Name:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 47 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. USAir		Transaction ID: 0203200316E4036	
Mailing Address P.O. Box 66100		Date of Disbursement 12 / 04 / 2002	
City Winston Salem	State NC	Zip Code 27102-1501	Amount of Each Disbursement this Period 151.00
Purpose of Disbursement Travel	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Category/Type 002
State: District:	[MEMO ITEM] MEMO: TRAVEL		

Full Name (Last, First, Middle Initial) B. Mr. Bill Nelson		Transaction ID: 0327200353E4093	
Mailing Address 716 Hart Senate Office Building		Date of Disbursement 03 / 20 / 2003	
City Washington	State DC	Zip Code 20510-	Amount of Each Disbursement this Period 153.14
Purpose of Disbursement SEE BELOW	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Category/Type
State: District:	SEE BELOW		

Full Name (Last, First, Middle Initial) C. U.S. Senate Restaurant		Transaction ID: 0327200353E4096	
Mailing Address First and C Streets, NW		Date of Disbursement 01 / 21 / 2003	
City Washington	State DC	Zip Code 20510-	Amount of Each Disbursement this Period 33.75
Purpose of Disbursement Constituent Hospitality	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Category/Type 001
State: District:	[MEMO ITEM] MEMO: CONSTITUENT HOSPITALITY		

SUBTOTAL of Disbursements This Page (optional)	▶	153.14
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
U.S. Senate Restaurant

Mailing Address First and C Streets, NW

City Washington State DC Zip Code 20510-

Purpose of Disbursement
Weekly Constituent Coffee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 0327200353E4095
Date of Disbursement
03 13 2003

Amount of Each Disbursement this Period
96.89

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: WEEKLY CONSTITUENT
COFFEE

B. Full Name (Last, First, Middle Initial)
U.S. Senate Restaurant

Mailing Address First and C Streets, NW

City Washington State DC Zip Code 20510-

Purpose of Disbursement
Constituent Hospitality

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 0327200353E4094
Date of Disbursement
02 14 2003

Amount of Each Disbursement this Period
22.50

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: CONSTITUENT HOSPITA-
LITY

C. Full Name (Last, First, Middle Initial)
Office Catering

Mailing Address 1812 Fourteenth St., NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement
Fundraising Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 0327200353E4051
Date of Disbursement
02 19 2003

Amount of Each Disbursement this Period
223.92

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING EXPENSE

SUBTOTAL of Disbursements This Page (optional)	223.92
TOTAL This Period (last page this line number only)	223.92

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 49/76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Potomac Electric Power Company		Transaction ID: 0114200337E3973	
Mailing Address 1900 Pennsylvania Ave. NW		Date of Disbursement 01 / 01 / 2003	
City Washington	State DC	Zip Code 20088-	Amount of Each Disbursement this Period 48.80
Purpose of Disbursement Utilities		001 Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		UTILITIES
State: District:			

Full Name (Last, First, Middle Initial) B. Potomac Electric Power Company		Transaction ID: 0114200337E3982	
Mailing Address 1900 Pennsylvania Ave. NW		Date of Disbursement 01 / 09 / 2003	
City Washington	State DC	Zip Code 20088-	Amount of Each Disbursement this Period 53.68
Purpose of Disbursement Utilities		001 Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		UTILITIES
State: District:			

Full Name (Last, First, Middle Initial) C. Potomac Electric Power Company		Transaction ID: 0327200353E4041	
Mailing Address 1900 Pennsylvania Ave. NW		Date of Disbursement 02 / 10 / 2003	
City Washington	State DC	Zip Code 20088-	Amount of Each Disbursement this Period 154.00
Purpose of Disbursement Utilities		001 Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		UTILITIES
State: District:			

SUBTOTAL of Disbursements This Page (optional)	256.48
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 50 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Patomic Electric Power Company		Transaction ID: 0327200353E4055 Date of Disbursement 02 / 25 / 2003	
Mailing Address 1900 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 154.00	
City Washington	State DC	Zip Code 20068-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 UTILITIES
Purpose of Disbursement Utilities		Category/Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Schlmanski & Associates		Transaction ID: 0203200316E4027 Date of Disbursement 02 / 01 / 2003	
Mailing Address 126 C Street, NE		Amount of Each Disbursement this Period 5000.00	
City Washington	State DC	Zip Code 20002-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING
Purpose of Disbursement Fundraising		Category/Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Schlmanski & Associates		Transaction ID: 0327200353E4059 Date of Disbursement 02 / 28 / 2003	
Mailing Address 126 C Street, NE		Amount of Each Disbursement this Period 7500.00	
City Washington	State DC	Zip Code 20002-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 FUNDRAISING
Purpose of Disbursement Fundraising		Category/Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	12854.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

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(check only one)

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20b
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20c
 19b
21

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. Southern Consulting Group, L.L.C.

Transaction ID: 0114200337E3977

Date of Disbursement

 M W D Y
 01 02 2003

 Mailing Address Mr. Richard Reeves
P.O. Box 1842

 City State Zip Code
 Tallahassee FL 32302-

 Purpose of Disbursement
 SEE BELOW

Candidate Name

 Category/
Type

Amount of Each Disbursement this Period

1024.30

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SEE BELOW

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Southern Consulting Group, L.L.C.

Transaction ID: 0114200337E3978

Date of Disbursement

 M W D Y
 01 02 2003

 Mailing Address Mr. Richard Reeves
P.O. Box 1842

 City State Zip Code
 Tallahassee FL 32302-

 Purpose of Disbursement
 Fundraising Fee

Candidate Name

 003
 Category/
Type

Amount of Each Disbursement this Period

1000.00

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

 [MEMO ITEM]
 MEMO: FUNDRAISING FEE

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Sprint

Transaction ID: 0114200337E3979

Date of Disbursement

 M W D Y
 01 02 2003

Mailing Address Post Office Box 30784

 City State Zip Code
 Tampa FL 33630-3784

 Purpose of Disbursement
 Phone

Candidate Name

 001
 Category/
Type

Amount of Each Disbursement this Period

24.30

 Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

 [MEMO ITEM]
 MEMO: PHONE

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1024.30

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 / 78	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Sprint		Transaction ID: 0114200337E3987 Date of Disbursement 01 / 14 / 2003	
Mailing Address Post Office Box 30784		Amount of Each Disbursement this Period 33.69	
City Tampa	State FL	Zip Code 33630-3784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Phone		001 Category/Type	
Candidate Name		PHONE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Sprint		Transaction ID: 0327200353E4050 Date of Disbursement 02 / 12 / 2003	
Mailing Address Post Office Box 30784		Amount of Each Disbursement this Period 34.14	
City Tampa	State FL	Zip Code 33630-3784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Phone		001 Category/Type	
Candidate Name		PHONE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Sprint		Transaction ID: 0327200353E4066 Date of Disbursement 03 / 14 / 2003	
Mailing Address Post Office Box 30784		Amount of Each Disbursement this Period 34.15	
City Tampa	State FL	Zip Code 33630-3784	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Phone		001 Category/Type	
Candidate Name		PHONE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	101.98
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. SunTrust		Transaction ID: D114200337E3980 Date of Disbursement 01 02 2003	
Mailing Address P.O. Box 3926		Amount of Each Disbursement this Period 1011.74	
City Tallahassee	State FL	Zip Code 32315-3926	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Payroll Taxes		Category/Type 001	
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	PAYROLL TAXES		

Full Name (Last, First, Middle Initial) B. SunTrust		Transaction ID: 0327200353E4045 Date of Disbursement 01 22 2003	
Mailing Address P.O. Box 3926		Amount of Each Disbursement this Period 12.00	
City Tallahassee	State FL	Zip Code 32315-3926	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Bank Charge		Category/Type 001	
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	BANK CHARGE		

Full Name (Last, First, Middle Initial) C. SunTrust		Transaction ID: 0327200353E4047 Date of Disbursement 02 10 2003	
Mailing Address P.O. Box 3926		Amount of Each Disbursement this Period 4554.00	
City Tallahassee	State FL	Zip Code 32315-3926	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Payroll Taxes		Category/Type 001	
Candidate Name		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	PAYROLL TAXES		

SUBTOTAL of Disbursements This Page (optional)	5577.74
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. SunTrust

Transaction ID: D327200353E4043

Date of Disbursement

02 / 10 / 2003

Mailing Address P.O. Box 3926

City State Zip Code
Tallahassee FL 32315-3926

Amount of Each Disbursement this Period

363.60

Purpose of Disbursement
Payroll Taxes

001
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

PAYROLL TAXES

State: District:

Full Name (Last, First, Middle Initial)

B. SunTrust

Transaction ID: D327200353E4079

Date of Disbursement

02 / 11 / 2003

Mailing Address P.O. Box 3926

City State Zip Code
Tallahassee FL 32315-3926

Amount of Each Disbursement this Period

-12.00

Purpose of Disbursement
Bankcharge Credit

001
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

BANKCHARGE CREDIT

State: District:

Full Name (Last, First, Middle Initial)

C. SunTrust

Transaction ID: D327200353E4058

Date of Disbursement

02 / 28 / 2003

Mailing Address P.O. Box 3926

City State Zip Code
Tallahassee FL 32315-3926

Amount of Each Disbursement this Period

363.60

Purpose of Disbursement
Payroll Taxes

001
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

PAYROLL TAXES

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

715.20

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

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
SunTrust BankCard, N.A.

Transaction ID: 0114200337E3971
Date of Disbursement
01 / 01 / 2003

Mailing Address P.O. Box 628220

City Orlando State FL Zip Code 32862-8220

Purpose of Disbursement SEE BELOW

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period
1524.77

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SEE BELOW

B. Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: 0129200353E4006
Date of Disbursement
11 / 25 / 2002

Mailing Address Post Office Box 8220

City Aurora State IL Zip Code 60572-8220

Purpose of Disbursement Phone

Candidate Name

Category/Type 001

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period
21.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: PHONE

C. Full Name (Last, First, Middle Initial)
Concha Mia Crazy

Transaction ID: 0129200353E4005
Date of Disbursement
11 / 22 / 2002

Mailing Address 191 E. Pine St.

City Orlando State FL Zip Code 32801-

Purpose of Disbursement Catering

Candidate Name

Category/Type 003

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period
206.96

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: CATERING

SUBTOTAL of Disbursements This Page (optional)	1524.77
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (in Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address Hartfield International Airport

City Atlanta State GA Zip Code 30320-

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 0129200353E4002
Date of Disbursement
12 08 2002

Amount of Each Disbursement this Period
295.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: TRAVEL

B. Full Name (Last, First, Middle Initial)
Delta Airlines

Mailing Address Hartfield International Airport

City Atlanta State GA Zip Code 30320-

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 0129200353E4001
Date of Disbursement
12 10 2002

Amount of Each Disbursement this Period
114.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: TRAVEL

C. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 0129200353E3996
Date of Disbursement
11 26 2002

Amount of Each Disbursement this Period
26.52

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
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
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. FedEx		Transaction ID: 0129200353E3995 Date of Disbursement 12 / 05 / 2002
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 13.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Memphis	State TN	
Zip Code 38101-1140	Purpose of Disbursement Postage	[MEMO ITEM] MEMO: POSTAGE
Candidate Name	Category Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Hampton Inns		Transaction ID: 0129200353E3999 Date of Disbursement 11 / 12 / 2002
Mailing Address 1975 N. Druid Hills Road		Amount of Each Disbursement this Period 285.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta	State GA	
Zip Code 30329	Purpose of Disbursement Travel	[MEMO ITEM] MEMO: TRAVEL
Candidate Name	Category Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: 0129200353E3998 Date of Disbursement 12 / 06 / 2002
Mailing Address 1781 Cross Roads Dr.		Amount of Each Disbursement this Period 156.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Odenton	State MD	
Zip Code 21113	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Candidate Name	Category Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 58 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: 0129200353E3997	
Mailing Address 17B1 Cross Roads Dr.		Date of Disbursement 12 / 11 / 2002	
City Odenton	State MD	Zip Code 21113	Amount of Each Disbursement this Period 125.04
Purpose of Disbursement Office Supplies		Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	[MEMO ITEM] MEMO: OFFICE SUPPLIES	

Full Name (Last, First, Middle Initial) B. Postmaster		Transaction ID: 0129200353E3994	
Mailing Address 2 Mass Ave., NE		Date of Disbursement 11 / 26 / 2002	
City Washington	State DC	Zip Code 20002-9998	Amount of Each Disbursement this Period 74.00
Purpose of Disbursement Postage		Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	[MEMO ITEM] MEMO: POSTAGE	

Full Name (Last, First, Middle Initial) C. Postmaster		Transaction ID: 0129200353E3993	
Mailing Address 2 Mass Ave., NE		Date of Disbursement 11 / 15 / 2002	
City Washington	State DC	Zip Code 20002-9998	Amount of Each Disbursement this Period 4.97
Purpose of Disbursement Postage		Category/Type 001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	[MEMO ITEM] MEMO: POSTAGE	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Senate Gift Shop		Transaction ID: 0129200353E4000 Date of Disbursement 11 / 24 / 2002
Mailing Address Russell Senate Office Bldg., Room		Amount of Each Disbursement this Period 126.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington	State Zip Code DC 20510-	
Purpose of Disbursement Constituent Hospitality		<input type="checkbox"/> Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CONSTITUENT HOSPITALITY
State: District:		

Full Name (Last, First, Middle Initial) B. SunTrust BankCard , N.A.		Transaction ID: 0129200353E4008 Date of Disbursement 01 / 22 / 2003
Mailing Address P.O. Box 628220		Amount of Each Disbursement this Period 225.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Orlando	State Zip Code FL 32862-8220	
Purpose of Disbursement SEE BELOW		<input type="checkbox"/> Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: 0129200353E4017 Date of Disbursement 12 / 25 / 2002
Mailing Address Post Office Box 8220		Amount of Each Disbursement this Period 21.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Aurora	State Zip Code IL 60572-8220	
Purpose of Disbursement Phone		<input type="checkbox"/> Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: PHONE
State: District:		

SUBTOTAL of Disbursements This Page (optional)	225.28
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 60 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. FedEx		Transaction ID: 0129200353E4010 Date of Disbursement 12 / 16 / 2002	
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 12.37	
City Memphis	State TN	Zip Code 38101-1140	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/> Category/Type 001 MEMO: POSTAGE
Purpose of Disbursement Postage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. FedEx		Transaction ID: 0129200353E4011 Date of Disbursement 12 / 17 / 2002	
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 18.56	
City Memphis	State TN	Zip Code 38101-1140	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/> Category/Type 001 MEMO: POSTAGE
Purpose of Disbursement Postage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. FedEx		Transaction ID: 0129200353E4012 Date of Disbursement 12 / 23 / 2002	
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 13.10	
City Memphis	State TN	Zip Code 38101-1140	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/> Category/Type 001 MEMO: POSTAGE
Purpose of Disbursement Postage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. FedEx

Transaction ID: 0129200353E4013

Date of Disbursement

12 / 24 / 2002

Mailing Address P.O. Box 1140

Amount of Each Disbursement this Period

City State Zip Code
Memphis TN 38101-1140

27.87

Purpose of Disbursement
Postage

001
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

(MEMO ITEM)
MEMO: POSTAGE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Senate Gift Shop

Transaction ID: 0129200353E4014

Date of Disbursement

12 / 17 / 2002

Mailing Address Russell Senate Office Bldg., Room

Amount of Each Disbursement this Period

City State Zip Code
Washington DC 20510-

40.75

Purpose of Disbursement
Hospitality Credit

001
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

(MEMO ITEM)
MEMO: HOSPITALITY CREDIT

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. The Biltmore Hotel

Transaction ID: 0129200353E4018

Date of Disbursement

12 / 20 / 2002

Mailing Address 1200 Anastasia Ave.

Amount of Each Disbursement this Period

City State Zip Code
Coral Gables FL 33134-

154.21

Purpose of Disbursement
Travel

002
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

(MEMO ITEM)
MEMO: TRAVEL

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

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(check only one)

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

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NAME OF COMMITTEE (In Full) Bill Nelson for U.S. Senate Campaign Committee		Transaction ID: 0327200353E4053 Date of Disbursement 02 19 2003	
Full Name (Last, First, Middle Initial) A. SunTrust BankCard, N.A.		Amount of Each Disbursement this Period 1316.02	
Mailing Address P.O. Box 628220		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Orlando	State FL	Zip Code 32862-8220	SEE BELOW
Purpose of Disbursement SEE BELOW		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. AT&T		Transaction ID: 0327200353E4075 Date of Disbursement 01 22 2003	
Mailing Address Post Office Box 8220		Amount of Each Disbursement this Period 21.95	
City Aurora	State IL	Zip Code 60572-8220	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Phone		Category/ Type 001	
Candidate Name		[MEMO ITEM] MEMO: PHONE	
Office Sought: House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. Delta Airlines		Transaction ID: 0327200353E4077 Date of Disbursement 01 29 2003	
Mailing Address Hartsfield International Airport		Amount of Each Disbursement this Period 201.50	
City Atlanta	State GA	Zip Code 30320	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Travel		Category/ Type 002	
Candidate Name		[MEMO ITEM] MEMO: TRAVEL	
Office Sought: House Senate President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		1316.02	
TOTAL This Period (last page this line number only)			

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

 FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address P.O. Box 1140

 City State Zip Code
 Memphis TN 38101-1140

 Purpose of Disbursement
 Postage

Candidate Name

 001
 Category/
 Type

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0327200353E4063

Date of Disbursement

01 27 2003

Amount of Each Disbursement this Period

40.57

 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

 [MEMO ITEM]
 MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address P.O. Box 1140

 City State Zip Code
 Memphis TN 38101-1140

 Purpose of Disbursement
 Postage

Candidate Name

 001
 Category/
 Type

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0327200353E4064

Date of Disbursement

01 30 2003

Amount of Each Disbursement this Period

12.29

 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

 [MEMO ITEM]
 MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address P.O. Box 1140

 City State Zip Code
 Memphis TN 38101-1140

 Purpose of Disbursement
 Postage

Candidate Name

 001
 Category/
 Type

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 0327200353E4061

Date of Disbursement

01 13 2003

Amount of Each Disbursement this Period

28.21

 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

 [MEMO ITEM]
 MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 64 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. FedEx		Transaction ID: 0327200353E4060	
Mailing Address P.O. Box 1140		Date of Disbursement 01 14 2003	
City Memphis	State TN	Zip Code 38101-1140	Amount of Each Disbursement this Period 28.21
Purpose of Disbursement Postage		001 Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: POSTAGE
State: District:			

Full Name (Last, First, Middle Initial) B. FedEx		Transaction ID: 0327200353E4066	
Mailing Address P.O. Box 1140		Date of Disbursement 01 14 2003	
City Memphis	State TN	Zip Code 38101-1140	Amount of Each Disbursement this Period 25.86
Purpose of Disbursement Postage		001 Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: POSTAGE
State: District:			

Full Name (Last, First, Middle Initial) C. FedEx		Transaction ID: 0327200353E4066	
Mailing Address P.O. Box 1140		Date of Disbursement 01 27 2003	
City Memphis	State TN	Zip Code 38101-1140	Amount of Each Disbursement this Period 10.57
Purpose of Disbursement Postage		001 Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: POSTAGE
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (in Full)
Bill Nelson for U.S. Senate Campaign Committee

A. FedEx

Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4062
Date of Disbursement
01 21 2003

Amount of Each Disbursement this Period
28.21

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: POSTAGE

B. Nextel

Full Name (Last, First, Middle Initial)
Nextel

Mailing Address P.O. Box 17521

City Baltimore State MD Zip Code 21207-1621

Purpose of Disbursement Phone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4076
Date of Disbursement
01 28 2003

Amount of Each Disbursement this Period
381.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: PHONE

C. Oceanaire Seafood Room

Full Name (Last, First, Middle Initial)
Oceanaire Seafood Room

Mailing Address 1201 F Street NW

City Washington State DC Zip Code 20004-

Purpose of Disbursement Constituent Hospitality

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4070
Date of Disbursement
01 21 2003

Amount of Each Disbursement this Period
241.05

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: CONSTITUENT HOSPITALITY

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Postmaster

Full Name (Last, First, Middle Initial)
Postmaster

Transaction ID: 0327200353E4068
Date of Disbursement
01 / 31 / 2003

Mailing Address 2 Mass Ave., NE

City Washington State DC Zip Code 20002-9998

Purpose of Disbursement Postage
Candidate Name

Amount of Each Disbursement this Period
9.15

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: POSTAGE

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

Category/Type: 001

B. Postmaster

Full Name (Last, First, Middle Initial)
Postmaster

Transaction ID: 0327200353E4069
Date of Disbursement
01 / 28 / 2003

Mailing Address 2 Mass Ave., NE

City Washington State DC Zip Code 20002-9998

Purpose of Disbursement Postage
Candidate Name

Amount of Each Disbursement this Period
74.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: POSTAGE

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

Category/Type: 001

C. U.S. Senate Restaurant

Full Name (Last, First, Middle Initial)
U.S. Senate Restaurant

Transaction ID: 0327200353E4078
Date of Disbursement
01 / 28 / 2003

Mailing Address First and C Streets, NW

City Washington State DC Zip Code 20510-

Purpose of Disbursement Weekly Constituent Coffee
Candidate Name

Amount of Each Disbursement this Period
89.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
MEMO: WEEKLY CONSTITUENT COFFEE

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

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

**SCHEDULE B (FEC Form F3)
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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. U.S. Senate Restaurant

Mailing Address First and C Streets, NW

City Washington State DC Zip Code 20510-

Purpose of Disbursement
Weekly Constituent Coffee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Transaction ID: 0327200353E4074

Date of Disbursement

02 / 04 / 2003

Amount of Each Disbursement this Period

89.40

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: WEEKLY CONSTITUENT
COFFEE

Full Name (Last, First, Middle Initial)

B. SunTrust BankCard, N.A.

Mailing Address P.O. Box 628220

City Orlando State FL Zip Code 32862-8220

Purpose of Disbursement
SEE BELOW

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: 0327200353E4087

Date of Disbursement

03 / 20 / 2003

Amount of Each Disbursement this Period

6566.09

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SEE BELOW

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address Post Office Box 8220

City Aurora State IL Zip Code 60572-8220

Purpose of Disbursement
Phone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Transaction ID: 0327200353E4110

Date of Disbursement

02 / 24 / 2003

Amount of Each Disbursement this Period

21.95

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: PHONE

SUBTOTAL of Disbursements This Page (optional) ▶

6588.09

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

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 68 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Concha Me Crazy		Transaction ID: 0327200353E4114	
Mailing Address 191 E. Pine St.		Date of Disbursement 03 / 05 / 2003	
City Orlando	State FL	Zip Code 32801-	Amount of Each Disbursement this Period 1980.41
Purpose of Disbursement Catering		Category/ Type 003	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: CATERING
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Delta Airlines		Transaction ID: 0327200353E4109	
Mailing Address Hartfield International Airport		Date of Disbursement 02 / 19 / 2003	
City Atlanta	State GA	Zip Code 30320-	Amount of Each Disbursement this Period 306.50
Purpose of Disbursement Travel		Category/ Type 002	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Embassy Suites		Transaction ID: 0327200353E4113	
Mailing Address Orlando Regional Airport		Date of Disbursement 03 / 04 / 2003	
City Orlando	State FL	Zip Code 32811-	Amount of Each Disbursement this Period 346.94
Purpose of Disbursement Travel		Category/ Type 002	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMO: TRAVEL
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 69 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. FedEx		Transaction ID: 0327200353E4111	
Mailing Address P.O. Box 1140		Date of Disbursement 02 / 28 / 2003	
City Memphis	State TN	Zip Code 38101-1140	Amount of Each Disbursement this Period 16.20
Purpose of Disbursement Postage		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: POSTAGE
State:	District:		

Full Name (Last, First, Middle Initial) B. Hyatt Hotels		Transaction ID: 0327200353E4115	
Mailing Address International Airport		Date of Disbursement 03 / 10 / 2003	
City Orlando	State FL	Zip Code 32816-	Amount of Each Disbursement this Period 991.60
Purpose of Disbursement Fundraising Expense		002 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: FUNDRAISING EXPENSE
State:	District:		

Full Name (Last, First, Middle Initial) C. Nextel		Transaction ID: 0327200353E4112	
Mailing Address P.O. Box 17621		Date of Disbursement 02 / 28 / 2003	
City Baltimore	State MD	Zip Code 21297-1621	Amount of Each Disbursement this Period 271.35
Purpose of Disbursement Phone		001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] MEMO: PHONE
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (in Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address 1781 Cross Roads Dr.

City Odenton State MD Zip Code 21113-

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4100
Date of Disbursement
02 | 23 | 2003

Amount of Each Disbursement this Period
15.89

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: OFFICE SUPPLIES

B. Full Name (Last, First, Middle Initial)
Postmaster

Mailing Address 2 Mass Ave., NE

City Washington State DC Zip Code 20002-9998

Purpose of Disbursement
Fundraising Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4105
Date of Disbursement
02 | 12 | 2003

Amount of Each Disbursement this Period
2220.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: FUNDRAISING EXPENSE

C. Full Name (Last, First, Middle Initial)
Senate Gift Shop

Mailing Address Russell Senate Office Bldg., Room

City Washington State DC Zip Code 20510-

Purpose of Disbursement
Constituent Hospitality

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 0327200353E4104
Date of Disbursement
02 | 27 | 2003

Amount of Each Disbursement this Period
20.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
MEMO: CONSTITUENT HOSPITA-
LITY

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. Senate Gift Shop		Transaction ID: 0327200353E4105 Date of Disbursement 02 27 2003
Mailing Address Russell Senate Office Bldg., Room		Amount of Each Disbursement this Period 12.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington	State DC	
Zip Code 20510-	Purpose of Disbursement Constituent Hospitality	[MEMO ITEM] MEMO: CONSTITUENT HOSPITALITY
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: 0327200353E4108 Date of Disbursement 03 02 2003
Mailing Address 2774 East Colonial Dr.		Amount of Each Disbursement this Period 41.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Orlando	State FL	
Zip Code 32803-	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: 0327200353E4107 Date of Disbursement 02 13 2003
Mailing Address 2774 East Colonial Dr.		Amount of Each Disbursement this Period 61.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Orlando	State FL	
Zip Code 32803-	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District		

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 72 / 76
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. U.S. Senate Restaurant		Transaction ID: 0327200353E4102 Date of Disbursement 02 28 2003	
Mailing Address First and C Streets, NW		Amount of Each Disbursement this Period 89.40	
City Washington	State DC	Zip Code 20510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input checked="" type="checkbox"/> [MEMO ITEM] MEMO: WEEKLY CONSTITUENT COFFEE
Purpose of Disbursement Weekly Constituent Coffee		001 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. U.S. Senate Restaurant		Transaction ID: 0327200353E4101 Date of Disbursement 02 14 2003	
Mailing Address First and C Streets, NW		Amount of Each Disbursement this Period 89.40	
City Washington	State DC	Zip Code 20510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input checked="" type="checkbox"/> [MEMO ITEM] MEMO: WEEKLY CONSTITUENT COFFEE
Purpose of Disbursement Weekly Constituent Coffee		001 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. U.S. Senate Restaurant		Transaction ID: 0327200353E4103 Date of Disbursement 03 07 2003	
Mailing Address First and C Streets, NW		Amount of Each Disbursement this Period 89.40	
City Washington	State DC	Zip Code 20510-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input checked="" type="checkbox"/> [MEMO ITEM] MEMO: WEEKLY CONSTITUENT COFFEE
Purpose of Disbursement Weekly Constituent Coffee		001 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (in Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. US Cellular		Transaction ID: 0114200337E3976 Date of Disbursement 01 / 02 / 2003
Mailing Address 4700 S. Garnett Road		Amount of Each Disbursement this Period 329.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tulsa	State OK	
Zip Code 74146-5299	Purpose of Disbursement Phone	PHONE
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. US Cellular		Transaction ID: 0114200337E3981 Date of Disbursement 01 / 08 / 2003
Mailing Address 4700 S. Garnett Road		Amount of Each Disbursement this Period 98.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tulsa	State OK	
Zip Code 74146-5299	Purpose of Disbursement Phone	PHONE
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. US Cellular		Transaction ID: 0327200353E4044 Date of Disbursement 02 / 10 / 2003
Mailing Address 4700 S. Garnett Road		Amount of Each Disbursement this Period 88.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tulsa	State OK	
Zip Code 74146-5299	Purpose of Disbursement Phone	PHONE
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	517.06
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 74/78
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial) A. US Cellular		Transaction ID: 0327200353E4083 Date of Disbursement 03 07 2003
Mailing Address 4700 S. Garnett Road		Amount of Each Disbursement this Period 95.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tulsa	State OK	
Purpose of Disbursement Phone		001 Category Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONE
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D114200387E3984 Date of Disbursement 01 09 2003
Mailing Address P.O. Box 17577		Amount of Each Disbursement this Period 140.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baltimore	State MD	
Purpose of Disbursement Phone		001 Category Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONE
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Transaction ID: 0327200353E4052 Date of Disbursement 02 19 2003
Mailing Address P.O. Box 17577		Amount of Each Disbursement this Period 130.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baltimore	State MD	
Purpose of Disbursement Phone		001 Category Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PHONE
State: District:		

SUBTOTAL of Disbursements This Page (optional)	366.47
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form F3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (in Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name (Last, First, Middle Initial)

A. Verizon

Transaction ID: 0327200353E4088

Date of Disbursement

03 / 20 / 2003

Mailing Address P.O. Box 17577

City Baltimore State MD Zip Code 21297-0513

Amount of Each Disbursement this Period

145.52

Purpose of Disbursement
Phone

001
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

PHONE

Full Name (Last, First, Middle Initial)

B. Herschel Vinyard

Transaction ID: 0327200353E4089

Date of Disbursement

03 / 20 / 2003

Mailing Address Atlantic Marine, Inc.
8500 Heckacher Dr.

City Jacksonville State FL Zip Code 32226

Amount of Each Disbursement this Period

640.50

Purpose of Disbursement
SEE BELOW

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

SEE BELOW

Full Name (Last, First, Middle Initial)

C. The River Club

Transaction ID: 0327200353E4090

Date of Disbursement

03 / 07 / 2003

Mailing Address One Independent Dr., Suite 350D

City Jacksonville State FL Zip Code 32202

Amount of Each Disbursement this Period

640.50

Purpose of Disbursement
Fundraising

003
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

[MEMO ITEM]
MEMO: FUNDRAISING

SUBTOTAL of Disbursements This Page (optional) ▶

786.02

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

64882.44

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