

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED.
SECRETARY OF THE SENATE
APR 15 PM 1:45

Office Use Only

1. NAME OF
COMMITTEE (in full)

USE FEC MAILING LABEL
OR TYPE OR PRINT ▼

Example: If typing, type
over the lines

Florida Senate 2012

ADDRESS (number and street)

120 Maryland Ave



Check if different
than previously
reported. (ACC)

Washington

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIPCODE ▲

C00492850

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report(Q1)



July 15
Quarterly Report(Q2)



October 15
Quarterly Report(Q3)



January 31
Quarterly Report(YE)



July 31 Mid-Year
Report(Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on



in the
State of



(d) 30-Day
Post -Election
Report for the:



General (30G)

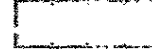


Runoff (30R)



Special (30S)

Election on



in the
State of



5. Covering Period

02

04

2011

through

03

31

2011

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

Adriane Gross

Signature of Treasurer



Date : 04 15 2011

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 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Florida Senate 2012

Report Covering the Period: From:

MM	DD	YYYY
02	04	2011

 To:

MM	DD	YYYY
03	31	2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date													
6. (a) Cash on Hand January 1 <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td><td></td><td></td></tr></table>	Y	Y	Y	Y	Y	Y	2	0	1	1				<table><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y	Y	Y										
2	0	1	1												
0.00															
(b) Cash on Hand at Beginning of Reporting Period	<table><tr><td>0.00</td></tr></table>	0.00													
0.00															
(c) Total Receipts (from Line 19)	<table><tr><td>718859.40</td></tr></table>	718859.40	<table><tr><td>718859.40</td></tr></table>	718859.40											
718859.40															
718859.40															
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table><tr><td>718859.40</td></tr></table>	718859.40	<table><tr><td>718859.40</td></tr></table>	718859.40											
718859.40															
718859.40															
7. Total Disbursements (from Line 31)	<table><tr><td>695076.10</td></tr></table>	695076.10	<table><tr><td>695076.10</td></tr></table>	695076.10											
695076.10															
695076.10															
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td>23783.30</td></tr></table>	23783.30	<table><tr><td>23783.30</td></tr></table>	23783.30											
23783.30															
23783.30															
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0.00</td></tr></table>	0.00													
0.00															
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0.00</td></tr></table>	0.00													
0.00															

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Florida Senate 2012

Report Covering the Period:

From:

M M D D Y Y W Y
0 2 0 4 2 0 1 1

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	709050.00	709050.00
(ii) Unitemized	9809.40	9809.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)	718859.40	718859.40
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	718859.40	718859.40
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	718859.40	718859.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	718859.40	718859.40

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	95126.10	95126.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	95126.10	95126.10
22. Transfers to Affiliated/Other Party Committees.....	597000.00	597000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	2950.00	2950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ➤	2950.00	2950.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	695076.10	695076.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	695076.10	695076.10

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	718859.40	718859.40
34. Total Contribution Refunds (from Line 28(d))	2950.00	2950.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	715909.40	715909.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	95126.10	95126.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	95126.10	95126.10

FE6AN026

11020152199

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 77
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Actblue

Mailing Address 14 Arrow Street

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Actblue PAC

Occupation

Conduit total listed in Agg. Field

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

376009.40

Date of Receipt

MM / DD / YYYY
03 / 31 / 2011

Transaction ID:

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

*Total Earmarked 2/4/2011-
3/31/2011

B.

Full Name (Last, First, Middle Initial)

E. Bonnie Schaefer

Mailing Address 2070 N Ocean Blvd

City

Boca Raton

State

FL

Zip Code

33431

FEC ID number of contributing
federal political committee.

C

Name of Employer
Westgrove Resort & Spa

Occupation

Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2011

Transaction ID: SA11AI-1

Amount of Each Receipt this Period

17900.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Jamie Schaefer

Mailing Address 2070 N Ocean Blvd

City

Boca Raton

State

FL

Zip Code

33431

FEC ID number of contributing
federal political committee.

C

Name of Employer
Westgrove Resort & Spa

Occupation

Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2011

Transaction ID: SA11AI-2

Amount of Each Receipt this Period

17900.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

35800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 7 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Scott Fuhrman
Mailing Address 7720 SW 61 Ave

City State Zip Code
South Miami FL 33143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Florida Bottling, Inc.

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2011

Transaction ID: SA11AI-3

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Cherie Joblove
Mailing Address 3344 Bimini Ave

City State Zip Code
Hollywood FL 33026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 23 / 2011

Transaction ID: SA11AI-5

Amount of Each Receipt this Period

17900.00

C.

Full Name (Last, First, Middle Initial)
Michael D. Joblove
Mailing Address 3344 Bimini Ave

City State Zip Code
Hollywood FL 33026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Genovete, Joblove & Bath-
st

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 23 / 2011

Transaction ID: SA11AI-6

Amount of Each Receipt this Period

17900.00

SUBTOTAL of Receipts This Page (optional)

36300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 8 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Marc Ginzberg

Mailing Address 261 Kirby Lane

City

Washington

State

DC

Zip Code

20580

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 23 / 2011

Transaction ID: SA11AI-7

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

David Tobin

Mailing Address 6801 Southwest 147 Ave. Apt. 4

City

Miami

State

FL

Zip Code

33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Accounting Clerk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-8

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Susan Bright

Mailing Address 3370 NE 190th St Apt 3500

City

Aventura

State

FL

Zip Code

33180

FEC ID number of contributing
federal political committee.

C

Name of Employer
TCDI

Occupation
Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-9

Amount of Each Receipt this Period

500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

11020152202

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 9 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Mable Brown

Mailing Address 11266 SW 166 Ter

City State Zip Code
Miami FL 33157

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

Name of Employer
N/A

Occupation
Retired

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-10

Amount of Each Receipt this Period
250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Joe Zednik

Mailing Address 27211 Oak Knoll Drive

City State Zip Code
Bonita Springs FL 34134

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

Name of Employer
N/A

Occupation
Retired

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
14200.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-12

Amount of Each Receipt this Period
14200.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Deanna Zednik

Mailing Address 27211 Oak Knoll Drive

City State Zip Code
Bonita Springs FL 34134

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

Name of Employer
N/A

Occupation
Retired

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
14200.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-13

Amount of Each Receipt this Period
14200.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

28650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 10 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Per Loof

Mailing Address 101 NE 3rd Ave

City

Ft. Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kemet Corp

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-15

Amount of Each Receipt this Period

17900.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Linda Aguirre

Mailing Address 8055 Noremac Ave.

City

Miami Beach

State

FL

Zip Code

33141

FEC ID number of contributing
federal political committee.

C

Name of Employer
Black, Srebnick, Kornspan
& Stumpf P.A.

Occupation
Paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-16

Amount of Each Receipt this Period

500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Nelson Adams

Mailing Address 1098 NE Miami 5th St.

City

Miami Shores

State

FL

Zip Code

33138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phy Trust of Florida, LLC

Occupation
Partner/Chairman/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-17

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

23400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 11 / 77	
(check only one)			
<input checked="" type="checkbox"/> X	11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/>	12	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	14	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	15	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	17	<input type="checkbox"/>	<input type="checkbox"/>

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Martine Rothblatt

Mailing Address 82 Lanternback Island Drive

City State Zip Code
Satellite Beach FL 32937

FEC ID number of contributing federal political committee.

Name of Employer
United Therapeutics

Occupation
CEO

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-18

Amount of Each Receipt this Period
5000.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Frederick T. Kuykendall III

Mailing Address PO Box 2129

City State Zip Code
Fairhope AL 36533

FEC ID number of contributing federal political committee.

Name of Employer
Kuykendall & Associates

Occupation
Attorney

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
35800.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2011

Transaction ID: SA11AI-27

Amount of Each Receipt this Period
38500.00

See Refund Line 28a

C.

Full Name (Last, First, Middle Initial)
Joseph W. Blount

Mailing Address PO Box 344

City State Zip Code
Clay AL 35048

FEC ID number of contributing federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
35800.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2011

Transaction ID: SA11AI-22

Amount of Each Receipt this Period
35800.00

SUBTOTAL of Receipts This Page (optional) ▶

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

79300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 12/77	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	12
<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Stuart H. Smith

Mailing Address 516 St. Philips St

City State Zip Code
New Orleans LA 70116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith Stag

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35800.00

Date of Receipt

MM / DD / YYYY
02 / 25 / 2011

Transaction ID: SA11AI-23

Amount of Each Receipt this Period

35800.00

B.

Full Name (Last, First, Middle Initial)
Florence Smith

Mailing Address 1512 SE 4th Street

City State Zip Code
Fort Lauderdale FL 33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-119

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Manuela Smyth

Mailing Address P.O. Box 8950

City State Zip Code
Jupiter FL 33468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Diabetes Direct

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-123

Amount of Each Receipt this Period

300.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

36600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 13 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Jaret Davis

Mailing Address 1650 Coral Way Unit 805

City State Zip Code
Miami FL 33145

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greenberg Traurig, P.A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-126

Amount of Each Receipt this Period

2500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Lawrence Caplan

Mailing Address 2899 South Greenleaf Circle

City State Zip Code
Boynton Beach FL 33426

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawrence A. Caplan, P.A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-128

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Sunita Kaul

Mailing Address 541 Grand Parke Drive

City State Zip Code
Jacksonville FL 32259

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-129

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 14 / 77	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>	17		

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Barry Hoffman

Mailing Address 9070 Kimberly Blvd

City

Boca Raton

State

FL

Zip Code

33434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hoffman & Harding

Occupation
Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-130

Amount of Each Receipt this Period

750.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Lauren Kiefer

Mailing Address 649 West Oakland Park Blvd, 11

City

Oakland Park

State

FL

Zip Code

33311

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Florida

Occupation
Paralegal

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-132

Amount of Each Receipt this Period

300.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Betty Ferguson

Mailing Address 1625 N.W. 188th Terrace

City

Miami Gardens

State

FL

Zip Code

33169

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-133

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

1300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Helena Voss

Mailing Address 2810 NE 32 Street

City

Fort Lauderdale

State

FL

Zip Code

33306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Price Realty of S. Florida

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-136

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Samuel Keesal Jr

Mailing Address 400 Oceangate

City

Long Beach

State

CA

Zip Code

90802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Keesal, Young & Logan

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-139

Amount of Each Receipt this Period

2500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

George Cooper

Mailing Address 1100 Flagler Ave.

City

Key West

State

FL

Zip Code

33040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-143

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 16 / 77	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>	17	<input type="checkbox"/>	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Benjamin Lapp

Mailing Address 320 N Gordon Rd

City State Zip Code
Fort Lauderdale FL 33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Biosentinel Inc.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-144

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Yosi Gil

Mailing Address 17555 Collins Ave 3801

City State Zip Code
Sunny Isles Beach FL 33160

FEC ID number of contributing
federal political committee.

C

Name of Employer
J. Milton & Associates

Occupation
Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-148

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Jannette Milton

Mailing Address 3211 Ponce De Leon Blvd, Suite 301

City State Zip Code
Coral Gables FL 33134

FEC ID number of contributing
federal political committee.

C

Name of Employer
J. Milton & Associates

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-149

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) ▶

10250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 77

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Bernyce Adler

Mailing Address 10101 Collins Ave, Apt 16E

City

Bal Harbour

State

FL

Zip Code

33154

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-153

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Rudolph Moise

Mailing Address 12947 Equestrian Trl

City

Davie

State

FL

Zip Code

33330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Comprehensive Health Care

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-154

Amount of Each Receipt this Period

17900.00

C.

Full Name (Last, First, Middle Initial)

Lola Thomas

Mailing Address 50 South Pointe Drive, Unit 2803

City

Miami Beach

State

FL

Zip Code

33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-155

Amount of Each Receipt this Period

30800.00

SUBTOTAL of Receipts This Page (optional) ▶

58700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 18 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Hedda L. Lane

Mailing Address 4524 Bicaure Blvd

City

Boca Raton

State

FL

Zip Code

33487

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-156

Amount of Each Receipt this Period

17900.00

B.

Full Name (Last, First, Middle Initial)

Shephard Lane

Mailing Address 4524 Bocaire Lane

City

Boca Raton

State

FL

Zip Code

33487

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lane & Seidman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-157

Amount of Each Receipt this Period

17900.00

C.

Full Name (Last, First, Middle Initial)

Arnold Cohen

Mailing Address 500 Bayview Drive Apt. 1120

City

Sunny Isles Beach

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17800.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-31

Amount of Each Receipt this Period

17800.00

SUBTOTAL of Receipts This Page (optional) ▶

53600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 19 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Arthur Hertz

Mailing Address 3195 Ponce de Leon

City State Zip Code
Coral Gables FL 33134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wometco Enterprises

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-32

Amount of Each Receipt this Period

15000.00

B.

Full Name (Last, First, Middle Initial)
Barbara Martinez

Mailing Address 19333 Collins Avenue, Unit 231

City State Zip Code
Sunny Isles Beach FL 33160

FEC ID number of contributing
federal political committee.

C

Name of Employer
ERC Consultants, Inc.

Occupation
General Manager/VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-33

Amount of Each Receipt this Period

500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Maria-Ines Castro

Mailing Address 515 NE 93 Street

City State Zip Code
Miami Shores FL 33138

FEC ID number of contributing
federal political committee.

C

Name of Employer
3-Sixty Marketing Communi-
cations

Occupation
Publicist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-34

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

15750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Ralph Dinlocker

Mailing Address 313 NE 2nd Street, Unit 803

City

Ft. Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-36

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Theodore Weinreich

Mailing Address 1415 Sunset Harbour Dr., TH 10

City

Miami Beach

State

FL

Zip Code

33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Essilor of America

Occupation
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-37

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Robert Socolow

Mailing Address 3499 Oaks Way 301

City

Pompano Beach

State

FL

Zip Code

33069

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-38

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 21 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Natasha Reeder

Mailing Address 133 NE 2nd Ave, #1705

City State Zip Code
Miami FL 33132

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-40

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Mary Barley

Mailing Address PO Box 1915

City State Zip Code
Islamorada FL 33036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Environmentalist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-42

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Claudio Ballard

Mailing Address 1301 E. Broward Blvd.

City State Zip Code
Fort Lauderdale FL 33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Data Treasury Corp

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35800.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-44

Amount of Each Receipt this Period

35800.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

41050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Shani Reid

Mailing Address 2360 E Preserve Way, Apt. 205

City

Miramar

State

FL

Zip Code

33025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starboard Cruise Services

Occupation

Inventory Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-45

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Michael Gonzalez

Mailing Address 1764 NE 179 St.

City

North Miami

State

FL

Zip Code

33162

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-55

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Manya Lowry

Mailing Address 4900 N. Ocean Blvd, #812

City

Fort Lauderdale

State

FL

Zip Code

33308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morgan Stanley Smith Barn-
ey

Occupation

Financial Advisor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-59

Amount of Each Receipt this Period

600.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 23 / 77	
(check only one)			
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Charles Meyer

Mailing Address 2050 NW 69th Ter

City State Zip Code
Margate FL 33063

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-60

Amount of Each Receipt this Period

400.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Carol Holden

Mailing Address 821 Forresthill Drive

City State Zip Code
Coralville IA 52241

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-61

Amount of Each Receipt this Period

17900.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Michael Stacks

Mailing Address 17943 SW 77 Ct.

City State Zip Code
Miami FL 33157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miami Dade County

Occupation
Fire Rescue

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-63

Amount of Each Receipt this Period

500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

18800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Stanley Greenstein

Mailing Address 3802 NE 207th St, #1803

City

Aventura

State

FL

Zip Code

33180

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-64

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Andrew Dolkart

Mailing Address 6861 SW 89th Ter

City

Miami

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miami Economic Associates
Inc.

Occupation
Economic Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-65

Amount of Each Receipt this Period

500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Paul Kunder

Mailing Address 3576 Sanctuary Dr.

City

Coral Springs

State

FL

Zip Code

33065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-66

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Philip Leitman

Mailing Address 8791 SW 64 Ct

City

Miami

State

FL

Zip Code

33143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Philip Leitman Inc

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-67

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Jennifer Smith

Mailing Address 438 Fishtale Ter

City

Weston

State

FL

Zip Code

33327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Pastor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-68

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Timothy D. Richards

Mailing Address 2665 S. Bayshore Drive

City

Miami

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Richards & Associates, P.-
A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-70

Amount of Each Receipt this Period

500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

11020152219

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Joseph Bessard

Mailing Address PO Box 471751

City

Miami

State

FL

Zip Code

33247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Transportation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-74

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Carol Ventura

Mailing Address 2520 NW 135th St

City

Miami

State

FL

Zip Code

33167

FEC ID number of contributing
federal political committee.

C

Name of Employer
Embraer

Occupation

Repair Management Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-76

Amount of Each Receipt this Period

250.00

Conduit: Actblue Refund
See Line 28a

C.

Full Name (Last, First, Middle Initial)

Heike Luger

Mailing Address 3830 NW 91st Terr.

City

Sunrise

State

FL

Zip Code

33351

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carbon Solutions America

Occupation

Chief Environmental Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-77

Amount of Each Receipt this Period

500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

James Stephenson

Mailing Address 2940 N. Course Dr.

City

Pompano Beach

State

FL

Zip Code

33069

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-80

Amount of Each Receipt this Period

300.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Arlene Morelli

Mailing Address 350 E 79th Street

City

New York

State

NY

Zip Code

10075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morelli Law

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-81

Amount of Each Receipt this Period

10000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Benedict Morelli

Mailing Address 350 E 79th Street

City

New York

State

NY

Zip Code

10075

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morelli Ratner

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-82

Amount of Each Receipt this Period

10000.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

20300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 28 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Tabitha Frazier

Mailing Address 415 Vinnedge Ride

City

Tallahassee

State

FL

Zip Code

32303

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-86

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Gerald Grant, Jr.

Mailing Address 8560 SW 166th St

City

Palmetto Bay

State

FL

Zip Code

33517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Axa Advisors

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-87

Amount of Each Receipt this Period

500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Liz Wilthew

Mailing Address 7950 Old Coutler Rd.

City

Coral Gables

State

FL

Zip Code

33143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-88

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Gloria Romero Roses

Mailing Address 13431 Old Sheridan Street

City State Zip Code
Southwest Ranches FL 33330

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-94

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Anthony Rogers

Mailing Address 15101 SW 71st Ct

City State Zip Code
Miami FL 33158

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Planning Consultants
Group

Occupation
Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-95

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Joan Klipping

Mailing Address PO Box 398024

City State Zip Code
Miami Beach FL 33239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14200.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-96

Amount of Each Receipt this Period

14200.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

14700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Susan H McCurry

Mailing Address 2250 1st Ave.

City State Zip Code
Coralville IA 52241

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-97

Amount of Each Receipt this Period

17900.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Christopher Findlater

Mailing Address PO Box 398024

City State Zip Code
Miami Beach FL 33239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14200.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-98

Amount of Each Receipt this Period

14200.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
David G. McCurry

Mailing Address 2250 1st Ave.

City State Zip Code
Coralville IA 52241

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17900.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-99

Amount of Each Receipt this Period

17900.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

50000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 31 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Sara Lee

Mailing Address 10220 Reflections Blvd. W, #20

City

Sunrise

State

FL

Zip Code

33351

FEC ID number of contributing
federal political committee.

C

Name of Employer
Broward College

Occupation

Procurement Analyst, Buyer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-100

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Jenny Callicott

Mailing Address 3801 NE 207 St.

City

Miami

State

FL

Zip Code

33180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Writer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-101

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Marlene Micou

Mailing Address 1900 SW 81st Ave, #116

City

North Lauderdale

State

FL

Zip Code

33068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Broward County

Occupation

Case Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-102

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 32 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Joan Muir

Mailing Address 760 Stanton Dr.

City

Weston

State

FL

Zip Code

33326

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Miami

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-103

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Joan Muir

Mailing Address 760 Stanton Dr.

City

Weston

State

FL

Zip Code

33326

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Miami

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-104

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Greg Collier

Mailing Address 10297 Osprey Trace

City

West Palm Beach

State

FL

Zip Code

33412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Collier Capital Advisors

Occupation
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-105

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 33 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
De Anne Collier

Mailing Address 10297 Osprey Trace

City State Zip Code
West Palm Beach FL 33412

FEC ID number of contributing
federal political committee.

C

Name of Employer
De Anne Harris Collier,
M.D., P.A.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-108

Amount of Each Receipt this Period

2500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Brodes Hartley

Mailing Address 19338 SW 80th Ct

City State Zip Code
Cutler Bay FL 33157

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHI

Occupation
Healthcare Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-109

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Patricia Webb

Mailing Address 3339 Cocoplum Circle

City State Zip Code
Coconut Creek FL 33063

FEC ID number of contributing
federal political committee.

C

Name of Employer
StaffLink Outsourcing

Occupation
Director of HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-111

Amount of Each Receipt this Period

500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Consuelo Beck Sague

Mailing Address 4312 NW 107th Ave # 805

City

Miami

State

FL

Zip Code

33178

FEC ID number of contributing
federal political committee.

C

Name of Employer
Continuare Pediatrics

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-114

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Mitchell Berger

Mailing Address 350 E Las Olas Blvd, Ste 10W

City

Fort Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Berger Singerman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-117

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

F.J. Pollak

Mailing Address 2501 Bay Ave.

City

Miami Beach

State

FL

Zip Code

33140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tracfone Wireless

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30800.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-118

Amount of Each Receipt this Period

30800.00

SUBTOTAL of Receipts This Page (optional)

36300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Kim L Picazio

Mailing Address 2101 Middle River Drive

City

Fort Lauderdale

State

FL

Zip Code

33305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kim L Picazio P.A.

Occupation

Family Law Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 28 / 2011

Transaction ID: SA11AI-147

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rita Charlot

Mailing Address 7880 SW 183rd Terrace

City

Palmetto Bay

State

FL

Zip Code

33157

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 07 / 2011

Transaction ID: SA11AI-150

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Henry B. Howard

Mailing Address 600 Brickell Ave, Suite 400

City

Miami

State

FL

Zip Code

33131

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Education Finance Corp

Occupation

CEO/President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
03 / 07 / 2011

Transaction ID: SA11AI-151

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

15250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 36 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Dr. Laurinus Pierre

Mailing Address 8260 NE 2nd Ave

City

Miami

State

FL

Zip Code

33138

FEC ID number of contributing
federal political committee.

C

Name of Employer
GMHETC

Occupation
Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
03 / 07 / 2011

Transaction ID: SA11AI-152

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Benito Echeverria

Mailing Address 151 Crandon Blvd

City

Key Biscayne

State

FL

Zip Code

33149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-161

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Jeffrey Rubinstein

Mailing Address 18001 Old Cutler Road, Suite 6

City

Palmetto Bay

State

FL

Zip Code

33157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rubinstein & Associates,
PA

Occupation
Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-162

Amount of Each Receipt this Period

400.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

11020152230

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 37 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Paula W Tookes

Mailing Address 471 Savoie Dr

City State Zip Code
Palm Beach Gardens FL 33410

FEC ID number of contributing federal political committee.

Name of Employer
N/A

Occupation
Not Employed

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Transaction ID: SA11AI-166

Amount of Each Receipt this Period

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Freenette Williams

Mailing Address 17383 SW 47th Court

City State Zip Code
Miramar FL 33029

FEC ID number of contributing federal political committee.

Name of Employer
Hannah's Heart Assisted Living Facility

Occupation
Owner/Administrator

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Transaction ID: SA11AI-167

Amount of Each Receipt this Period

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Judith Kaye

Mailing Address 102 NE 2nd St. #390

City State Zip Code
Boca Raton FL 33432

FEC ID number of contributing federal political committee.

Name of Employer
N/A

Occupation
Retired

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Transaction ID: SA11AI-168

Amount of Each Receipt this Period

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 38 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Pierre Gerard Amisial

Mailing Address 19499 NE 10Th Ave # 103

City State Zip Code
North Miami Beach FL 33179

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

Name of Employer
CHC

Occupation
Medical & Health Manager

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-169

Amount of Each Receipt this Period
250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Nadiezka Morales

Mailing Address 2571N E 195 St

City State Zip Code
Miami FL 33180

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

Name of Employer
Jo Malone

Occupation
Sales

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-172

Amount of Each Receipt this Period
250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Arlen Dominek

Mailing Address 50 East Road, No 2G

City State Zip Code
Delray Beach FL 33483

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

Name of Employer
Peer Consulting

Occupation
Director

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-173

Amount of Each Receipt this Period
5000.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 39 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Arthur Benjamin

Mailing Address 6711 Royal Orchid Circle

City

Delray Beach

State

FL

Zip Code

33446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Results Weight Loss Cente-
rs

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-174

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Rafael Burgos

Mailing Address 75 Valencia Ave

City

Coral Gables

State

FL

Zip Code

33134

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Investments Group

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-175

Amount of Each Receipt this Period

500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Brian Hersh

Mailing Address 1541 Brickell Ave, #1407

City

Miami

State

FL

Zip Code

33129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-176

Amount of Each Receipt this Period

300.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

5800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 40 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Donald Jones

Mailing Address 18767 SW 79th Ave

City State Zip Code
Miami FL 33157

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Miami

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-177

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Richard Glukstad

Mailing Address P.O. Box 661544

City State Zip Code
Miami Springs FL 33266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barry University

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-179

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Paula W Tookes

Mailing Address 471 Savoie Dr

City State Zip Code
Palm Beach Gardens FL 33410

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-182

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 41 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Kansky Delisma

Mailing Address 7540 SW 115th St

City State Zip Code
Miami FL 33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-189

Amount of Each Receipt this Period

500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Wayne Rosen

Mailing Address 277 Galiano Ct.

City State Zip Code
Coral Gables FL 33143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-190

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Nyxlie Machado

Mailing Address 8563 NW 164th St.

City State Zip Code
Miami Lakes FL 33016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jackson Memorial Hospital

Occupation
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-191

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 42 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Bina Kohl

Mailing Address 1498 Zenith Way

City

Weston

State

FL

Zip Code

33327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Public Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-192

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Michael Liebowitz

Mailing Address 200 Costanera Rd.

City

Coral Gables

State

FL

Zip Code

33143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harbor Group

Occupation

Insurance Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-193

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Lara Liebowitz

Mailing Address 200 Costanera Rd

City

Coral Gables

State

FL

Zip Code

33143

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-194

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 43 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Thomas Murphy, Jr.

Mailing Address 5959 Blue Lagoon Dr, Ste 200

City Miami State FL Zip Code 33126

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

Name of Employer Coastal Construction Occupation General Contractor

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
11000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-195

Amount of Each Receipt this Period
11000.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Jessica Menasce

Mailing Address 11715 SW 142nd Pl.

City Miami State FL Zip Code 33186

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

Name of Employer Greenstreet Cafe Occupation Part Time Hostess

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-196

Amount of Each Receipt this Period
250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Brian Hersh

Mailing Address 1541 Brickell Ave, #1407

City Miami State FL Zip Code 33129

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-197

Amount of Each Receipt this Period
200.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

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

11450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 44 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Lynn Washington

Mailing Address 580 N.E. 59th Street

City

Miami

State

FL

Zip Code

33137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-198

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Neosha Jones

Mailing Address PO Box 612135

City

North Miami

State

FL

Zip Code

33261

FEC ID number of contributing
federal political committee.

C

Name of Employer
E-medical Education

Occupation
Student Affairs Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-200

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Wayne Hogan

Mailing Address 233 East Bay St., 8th floor

City

Jacksonville

State

FL

Zip Code

32202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Terrellhogan

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-202

Amount of Each Receipt this Period

15400.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

15900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Patricia Hogan

Mailing Address 913 Sorrento Road

City

Jacksonville

State

FL

Zip Code

32207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corporate Care Works

Occupation

Licensed Mental Health Counselor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-203

Amount of Each Receipt this Period

15400.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Joyce Julien

Mailing Address 2627 NE 203rd St, Ste 113

City

Miami

State

FL

Zip Code

33180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Julien Nutrition Inc

Occupation

Nutritionist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-204

Amount of Each Receipt this Period

500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Sanra Belkina

Mailing Address 18151 NE 31st Ct, Apt 817

City

Aventura

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-205

Amount of Each Receipt this Period

500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

16400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 46 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Michael Adler

Mailing Address 14000 NW 107th Ave

City State Zip Code
Miami FL 33172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Adler Group Inc

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

03 / 09 / 2011

Transaction ID: SA11AI-206

Amount of Each Receipt this Period

10000.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Morgan Budman

Mailing Address 2443 Fisher Island Drive

City State Zip Code
Miami Beach FL 33109

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

03 / 09 / 2011

Transaction ID: SA11AI-207

Amount of Each Receipt this Period

2000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Charles Dusseau

Mailing Address 7455 SW 122 St

City State Zip Code
Pinecrest FL 33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 09 / 2011

Transaction ID: SA11AI-208

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

12250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Neal R. Sonnett

Mailing Address Two South Biscayne Boulevard
Suite 2600

City State Zip Code
Miami FL 33131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Neal R. Sonnett, P.A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-213

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Brian Hersh

Mailing Address 1541 Brickell Ave, #1407

City State Zip Code
Miami FL 33129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-217

Amount of Each Receipt this Period

100.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Esther Blynn

Mailing Address 1990 NE 118 Rd

City State Zip Code
North Miami FL 33181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-226

Amount of Each Receipt this Period

200.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 48 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Esther Blynn

Mailing Address 1990 NE 118 Rd

City State Zip Code
North Miami FL 33181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-227

Amount of Each Receipt this Period

100.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Gabriel Martin

Mailing Address 11060 Griffing Blvd

City State Zip Code
Biscayne Park FL 33161

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-228

Amount of Each Receipt this Period

300.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
David Aldrich

Mailing Address 7207 Bay Dr, #1

City State Zip Code
Miami Beach FL 33141

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Airlines

Occupation
Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-230

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 49 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Sharon Moody

Mailing Address 10780 NW 5th

City State Zip Code
Plantation FL 33324

FEC ID number of contributing
federal political committee.

☒ C

Name of Employer
Broward Co. Schools

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-231

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Donald Scherve

Mailing Address 6156 Drake Street

City State Zip Code
Jupiter FL 33458

FEC ID number of contributing
federal political committee.

☒ C

Name of Employer
Self-Employed

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-233

Amount of Each Receipt this Period

5000.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Marcelle Daussy Jones

Mailing Address 9511 Collins Avenue Apt 1201

City State Zip Code
Surfside FL 33154

FEC ID number of contributing
federal political committee.

☒ C

Name of Employer
RJC

Occupation
Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-236

Amount of Each Receipt this Period

250.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 50 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Toya LaRenn

Mailing Address 3109 Grand Avenue, Suite 227

City State Zip Code
Miami FL 33133

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

Name of Employer
Self-Employed

Occupation
Well Consultant/Fitness Trainer

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-238

Amount of Each Receipt this Period
250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Eliot Abbot

Mailing Address 1581 Brickell Ave #1604

City State Zip Code
Miami FL 33129

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

Name of Employer
Hinshaw Culbertson LB

Occupation
Attorney

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-240

Amount of Each Receipt this Period
500.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)
Karen Adler

Mailing Address 115 Central Park West

City State Zip Code
New York NY 10023

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

Name of Employer
Adler Group

Occupation
Vice President

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-241

Amount of Each Receipt this Period
2500.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

11020152244

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 51 / 77	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Sara Adler

Mailing Address 1900 Sunset Harbor Drive PH 6

City State Zip Code
Miami Beach FL 33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
New Israel Fund

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
03 / 09 / 2011

Transaction ID: SA11AI-242

Amount of Each Receipt this Period

2500.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)
Emily Krestow

Mailing Address 312 Arizona Street

City State Zip Code
Hollywood FL 33019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
03 / 15 / 2011

Transaction ID: SA11AI-248

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
Lawrence Caplan

Mailing Address 2899 South Greenleaf Circle

City State Zip Code
Boynton Beach FL 33426

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawrence A. Caplan, P.A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
03 / 17 / 2011

Transaction ID: SA11AI-261

Amount of Each Receipt this Period

100.00

Conduit: Actblue

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 77

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Milagras Acosta

Mailing Address 5600 Collins Ave

City

Miami Beach

State

FL

Zip Code

33140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Journalist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 17 / 2011

Transaction ID: SA11AI-262

Amount of Each Receipt this Period

250.00

Conduit: Actblue

B.

Full Name (Last, First, Middle Initial)

Margaret Hall

Mailing Address 18000 NE 31st Ave

City

Miami

State

FL

Zip Code

33140

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 17 / 2011

Transaction ID: SA11AI-263

Amount of Each Receipt this Period

250.00

Conduit: Actblue

C.

Full Name (Last, First, Middle Initial)

Albert Dotson Jr.

Mailing Address 8421 SW 114th Street

City

Miami

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bilzin Sumberg et al. LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
03 / 23 / 2011

Transaction ID: SA11AI-270

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

709050.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 77

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

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)
Florida Senate 2012

A. Full Name (Last, First, Middle Initial) Actblue Technical Services	Transaction ID: SB21B-4 Date of Disbursement																				
Mailing Address 14 Arrow St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	6		2	0	1	1												
City Cambridge State MA Zip Code 02138	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees	<table border="1"> <tr> <td>1433.85</td> </tr> </table>	1433.85																			
1433.85																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) Actblue Technical Services	Transaction ID: SB21B-20 Date of Disbursement																				
Mailing Address 14 Arrow St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	1	1												
City Cambridge State MA Zip Code 02138	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees	<table border="1"> <tr> <td>2296.35</td> </tr> </table>	2296.35																			
2296.35																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-24 Date of Disbursement																				
Mailing Address PO Box 27025	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	1	1												
City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Charges	<table border="1"> <tr> <td>64.00</td> </tr> </table>	64.00																			
64.00																					
Candidate Name	<table border="1"> <tr> <td>001 Category/ Type</td> </tr> </table>	001 Category/ Type																			
001 Category/ Type																					
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) ▼																				
SUBTOTAL of Disbursements This Page (optional)																					
TOTAL This Period (last page this line number only)																					

3794.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Actblue Technical Services</p> <p>Mailing Address 14 Arrow St</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-116</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 6702.44</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Actblue Technical Services</p> <p>Mailing Address 14 Arrow St</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-142</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 338.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 27025</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-287</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 17.39</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

7058.36

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Fontainebleau Miami Beach

Mailing Address 4441 Collins Avenue

City Miami Beach State FL Zip Code 33140

Purpose of Disbursement
Catering/Facilities

Candidate Name

003
Category/
Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-145
Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

15917.05

B.

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

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-286
Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

0.65

C.

Full Name (Last, First, Middle Initial)
DNC Travel Offset Account

Mailing Address 430 South Capitol Street NE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-146
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

21661.80

SUBTOTAL of Disbursements This Page (optional) ►

37579.50

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B-285 Date of Disbursement																				
Mailing Address PO Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Fees	<table border="1"> <tr> <td>2112.20</td> </tr> </table>	2112.20																			
2112.20																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) Jat Art Corp	Transaction ID: SB21B-160 Date of Disbursement																				
Mailing Address 9172 Collins Ave #301	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	1												
City Surfside State FL Zip Code 33154	Amount of Each Disbursement this Period																				
Purpose of Disbursement Catering/Facilities	<table border="1"> <tr> <td>12111.62</td> </tr> </table>	12111.62																			
12111.62																					
Candidate Name	<table border="1"> <tr> <td>003 Category/ Type</td> </tr> </table>	003 Category/ Type																			
003 Category/ Type																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) Epicure Florist	Transaction ID: SB21B-159 Date of Disbursement																				
Mailing Address 1656 Alton Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	1												
City Miami Beach State FL Zip Code 33139	Amount of Each Disbursement this Period																				
Purpose of Disbursement Catering/Facilities	<table border="1"> <tr> <td>1070.00</td> </tr> </table>	1070.00																			
1070.00																					
Candidate Name	<table border="1"> <tr> <td>003 Category/ Type</td> </tr> </table>	003 Category/ Type																			
003 Category/ Type																					
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) ▼																				
SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td>15293.82</td> </tr> </table>	15293.82																			
15293.82																					
TOTAL This Period (last page this line number only) ▶																					

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Actblue Technical Services</p> <p>Mailing Address 14 Arrow St</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-243</p> <p>Date of Disbursement MM / DD / YYYY 03 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 4040.20</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Premier Parking Consulting Inc.</p> <p>Mailing Address 100 South Biscayne Blvd</p> <p>City Miami State FL Zip Code 33131</p> <p>Purpose of Disbursement Catering/Facilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-244</p> <p>Date of Disbursement MM / DD / YYYY 03 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 510.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 15731</p> <p>City Wilmington State DE Zip Code 19886</p> <p>Purpose of Disbursement Catering/Facilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-255</p> <p>Date of Disbursement MM / DD / YYYY 03 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 16571.00</p> <p>See Attached Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ▶

21121.20

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A. Full Name (Last, First, Middle Initial) Fontainebleau Miami Beach	Transaction ID: SB21B-255-10000 Date of Disbursement
Mailing Address 4441 Collins Ave	<div> <div>M M / D D / Y Y Y Y Y Y</div> <div>0 2 / 2 1 / 2 0 1 1</div> </div>
City Miami Beach State FL Zip Code 33160	Amount of Each Disbursement this Period
Purpose of Disbursement Catering/Facilities	<div>16571.00</div>
Candidate Name	<div>003</div> <div>Category/Type</div>
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) ▼ [MEMO ITEM] Memo Entry
B. Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: SB21B-256 Date of Disbursement
Mailing Address PO Box 15731	<div> <div>M M / D D / Y Y Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 1</div> </div>
City Wilmington State DE Zip Code 19886	Amount of Each Disbursement this Period
Purpose of Disbursement Licensing Fees	<div>18.50</div>
Candidate Name	<div></div> <div>Category/Type</div>
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) ▼ See Attached Memo Entry
C. Full Name (Last, First, Middle Initial) IStock*International	Transaction ID: SB21B-256-10000 Date of Disbursement
Mailing Address 1202 20th Ave SE	<div> <div>M M / D D / Y Y Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 1</div> </div>
City Chicago State IL Zip Code 60603	Amount of Each Disbursement this Period
Purpose of Disbursement Licensing Fees	<div>18.50</div>
Candidate Name	<div></div> <div>Category/Type</div>
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) ▼ [MEMO ITEM] Memo Entry
SUBTOTAL of Disbursements This Page (optional)	<div>18.50</div>
TOTAL This Period (last page this line number only)	<div></div>

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 15731

City State Zip Code
Wilmington DE 19886

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-257
Date of Disbursement

03 / 16 / 2011

Amount of Each Disbursement this Period

1237.50

See Attached Memo Entry

B.

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

Mailing Address 7777 E Apache Street

City State Zip Code
Tulsa OK 74063

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-257-10000
Date of Disbursement

02 / 16 / 2011

Amount of Each Disbursement this Period

387.40

[MEMO ITEM]
Memo Entry

C.

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

Mailing Address 7777 E Apache Street

City State Zip Code
Tulsa OK 74063

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-257-20000
Date of Disbursement

02 / 17 / 2011

Amount of Each Disbursement this Period

447.40

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ►

1237.50

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address 7777 E Apache Street

City
Tulsa

State
OK

Zip Code
74063

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B-257-30000

Date of Disbursement

02 / 22 / 2011

Amount of Each Disbursement this Period

402.70

[MEMO ITEM]

Memo Entry

B.

Full Name (Last, First, Middle Initial)

Patricia Ogle

Mailing Address 1201 South Barton St., #105

City
Arlington

State
VA

Zip Code
22204

Purpose of Disbursement
Travel Per Diem

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B-267

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Trilogy Interactive LLC

Mailing Address PO Box 4177

City
Mt View

State
CA

Zip Code
94040

Purpose of Disbursement
Blast Email

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B-268

Date of Disbursement

03 / 17 / 2011

Amount of Each Disbursement this Period

1250.00

SUBTOTAL of Disbursements This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
UPS

Transaction ID: SB21B-269
Date of Disbursement

Mailing Address PO Box 7247-0244

03 / 17 / 2011

City Philadelphia State PA Zip Code 19170

Amount of Each Disbursement this Period

Purpose of Disbursement
Delivery

001

Category/
Type

50.72

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Actblue Technical Services

Transaction ID: SB21B-266
Date of Disbursement

Mailing Address 14 Arrow St

03 / 17 / 2011

City Cambridge State MA Zip Code 02138

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Fees

Category/
Type

41.50

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Michael Adler

Transaction ID: SB21B-271
Date of Disbursement

Mailing Address 1400 NW 107th Ave
5th Floor

03 / 29 / 2011

City Miami State FL Zip Code 33172

Amount of Each Disbursement this Period

Purpose of Disbursement
Catering/Facilities

003

Category/
Type

1341.90

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1434.12

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Florida Senate 2012

<p>A. Full Name (Last, First, Middle Initial) Jon Adrabi</p> <p>Mailing Address 1050 Bricker Ave #2204</p> <p>City Miami State FL Zip Code 33131</p> <p>Purpose of Disbursement Catering/Facilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-272 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 166.83</p> <p>See Attached Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1139 5th Street</p> <p>City Miami Beach State FL Zip Code 33139</p> <p>Purpose of Disbursement Catering/Facilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-272-10000 Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 166.83</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Jon Adrabi</p> <p>Mailing Address 1050 Bricker Ave #2204</p> <p>City Miami State FL Zip Code 33131</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-273 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 40.00</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

206.83

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A. Full Name (Last, First, Middle Initial) Ami Copeland	Transaction ID: SB21B-274 Date of Disbursement
Mailing Address 1250 I Street NW, Suite 200	<div> <div>M M / D D / Y Y Y Y</div> <div>03 / 29 / 2011</div> </div>
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement Travel/Lodging/Meals	<div>130.77</div>
Candidate Name	<div>002</div> <div>Category/Type</div>
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) ▼
B. Full Name (Last, First, Middle Initial) Lisa Dowling	Transaction ID: SB21B-275 Date of Disbursement
Mailing Address 1951 N. Meridian Rd, Apt 4	<div> <div>M M / D D / Y Y Y Y</div> <div>03 / 29 / 2011</div> </div>
City Tallahassee State FL Zip Code 32303	Amount of Each Disbursement this Period
Purpose of Disbursement Travel/Lodging/Meals	<div>829.48</div>
Candidate Name	<div>002</div> <div>Category/Type</div>
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) ▼ See Attached Memo Entry
C. Full Name (Last, First, Middle Initial) Hartsfield Hospitality, LLC	Transaction ID: SB21B-275-10000 Date of Disbursement
Mailing Address Terminal T	<div> <div>M M / D D / Y Y Y Y</div> <div>03 / 02 / 2011</div> </div>
City Atlanta State GA Zip Code 30066	Amount of Each Disbursement this Period
Purpose of Disbursement Travel/Lodging/Meals	<div>4.60</div>
Candidate Name	<div>002</div> <div>Category/Type</div>
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) ▼ [MEMO ITEM] Memo Entry

SUBTOTAL of Disbursements This Page (optional)

960.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
 Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
 Delta Air Lines

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
 Travel/Lodging/Meals

Candidate Name

002
 Category/
 Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-275-20000
 Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
 Memo Entry

B.

Full Name (Last, First, Middle Initial)
 Solo at Fontainebleau

Mailing Address 4441 Collins Ave

City Miami Beach State FL Zip Code 33140

Purpose of Disbursement
 Travel/Lodging/Meals

Candidate Name

002
 Category/
 Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-275-30000
 Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

6.55

[MEMO ITEM]
 Memo Entry

C.

Full Name (Last, First, Middle Initial)
 Vida at Fontainebleau

Mailing Address 4441 Collins Ave

City Miami Beach State FL Zip Code 33140

Purpose of Disbursement
 Travel/Lodging/Meals

Candidate Name

002
 Category/
 Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-275-40000
 Date of Disbursement

03 / 03 / 2011

Amount of Each Disbursement this Period

25.40

[MEMO ITEM]
 Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A. Full Name (Last, First, Middle Initial) Fort Laud-HLWD Int'l Airport	Transaction ID: SB21B-275-50000 Date of Disbursement																				
Mailing Address 100 Aviation Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	1	1												
City Fort Lauderdale State FL Zip Code 33315	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel/Lodging/Meals	<table border="1"> <tr> <td>2.00</td> </tr> </table>	2.00																			
2.00																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				
[MEMO ITEM] Memo Entry																					
B. Full Name (Last, First, Middle Initial) Dunkin Donuts	Transaction ID: SB21B-275-60000 Date of Disbursement																				
Mailing Address Ft. Lauderdale International	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	1												
City Fort Lauderdale State FL Zip Code 33315	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel/Lodging/Meals	<table border="1"> <tr> <td>8.27</td> </tr> </table>	8.27																			
8.27																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				
[MEMO ITEM] Memo Entry																					
C. Full Name (Last, First, Middle Initial) Jerry's Famous Deli	Transaction ID: SB21B-275-70000 Date of Disbursement																				
Mailing Address 1450 Collins Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	1												
City Miami State FL Zip Code 33139	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel/Lodging/Meals	<table border="1"> <tr> <td>22.63</td> </tr> </table>	22.63																			
22.63																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				
[MEMO ITEM] Memo Entry																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00																			
0.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Pita Hut</p> <p>Mailing Address 530 14st Street</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-275-80000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 16.96</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Subway Sanwiches & Salads</p> <p>Mailing Address 917 W 41st Street</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-275-90000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 10.13</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Solo at Fontainebleau</p> <p>Mailing Address 4441 Collins Ave</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-275-100000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 15.85</p> <p>[MEMO ITEM] Memo Entry</p>

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Vida at Fontainebleau

Mailing Address 4441 Collins Ave

City State Zip Code
Miami Beach FL 33140

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-275-110000
Date of Disbursement

03 / 04 / 2011

Amount of Each Disbursement this Period

25.40

[MEMO ITEM]
Memo Entry

B.

Full Name (Last, First, Middle Initial)
Advantage Rent A Car

Mailing Address 600 Terminal Dr

City State Zip Code
Fort Lauderdale FL 33315

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-275-120000
Date of Disbursement

03 / 05 / 2011

Amount of Each Disbursement this Period

161.89

[MEMO ITEM]
Memo Entry

C.

Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address 2702 Love Field Drive

City State Zip Code
Dallas TX 75235

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-275-130000
Date of Disbursement

03 / 05 / 2011

Amount of Each Disbursement this Period

173.70

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

<p>A. Full Name (Last, First, Middle Initial) Delta Air Lines</p> <p>Mailing Address 1030 Delta Boulevard</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-275-140000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 238.40</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Spirit Airlines</p> <p>Mailing Address 2800 Executive Way</p> <p>City Miramar State FL Zip Code 33316</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-275-150000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 05 / 2011</p> <p>Amount of Each Disbursement this Period 92.70</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Diana Lott</p> <p>Mailing Address 916 Anchorage Rd</p> <p>City Tampa State FL Zip Code 33602</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-276</p> <p>Date of Disbursement MM / DD / YYYY 03 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 192.04</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

192.04

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A. Full Name (Last, First, Middle Initial) New Partners Consulting	Transaction ID: SB21B-277 Date of Disbursement
Mailing Address 1250 I Street NW, Suite 200	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>03 / 29 / 2011</div>
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement Travel/Lodging/Meals Candidate Name	<div> <div>Amount</div> <div>176.45</div> </div>
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) ▼
B. Full Name (Last, First, Middle Initial) Elizabeth Shamy	Transaction ID: SB21B-278 Date of Disbursement
Mailing Address 3232 S Mac Dill Ave #105	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>03 / 29 / 2011</div>
City Tampa State FL Zip Code 33629	Amount of Each Disbursement this Period
Purpose of Disbursement Travel/Lodging/Meals Candidate Name	<div> <div>Amount</div> <div>36.00</div> </div>
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) ▼
C. Full Name (Last, First, Middle Initial) Marley Wilkes	Transaction ID: SB21B-279 Date of Disbursement
Mailing Address 3232 S. Macdill Ave #105	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>03 / 29 / 2011</div>
City Tampa State FL Zip Code 33629	Amount of Each Disbursement this Period
Purpose of Disbursement Travel/Lodging/Meals Candidate Name	<div> <div>Amount</div> <div>584.04</div> </div>
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) ▼ See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

796.49

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
 Florida Senate 2012

A. Full Name (Last, First, Middle Initial) Southwest	Transaction ID: SB21B-279-10000 Date of Disbursement																				
Mailing Address 2702 Love Field Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	1	1												
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel/Lodging/Meals	<table border="1"> <tr> <td>302.40</td> </tr> </table>	302.40																			
302.40																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				
[MEMO ITEM] Memo Entry																					
B. Full Name (Last, First, Middle Initial) Southwest	Transaction ID: SB21B-279-15000 Date of Disbursement																				
Mailing Address 2702 Love Field Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	1												
City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel/Lodging/Meals	<table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00																			
40.00																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				
[MEMO ITEM] Memo Entry																					
C. Full Name (Last, First, Middle Initial) Mayfair Hotel and Spa	Transaction ID: SB21B-279-22500 Date of Disbursement																				
Mailing Address 3000 Florida Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	1												
City Coconut Grove State FL Zip Code 33133	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel/Lodging/Meals	<table border="1"> <tr> <td>121.62</td> </tr> </table>	121.62																			
121.62																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				
[MEMO ITEM] Memo Entry																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00																			
0.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
Vida at Fontainebleau

Mailing Address 4441 Collins Avenue

City State Zip Code
Miami Beach FL 33140

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-279-30000
Date of Disbursement

MM / DD / YYYY
03 / 03 / 2011

Amount of Each Disbursement this Period

25.40

[MEMO ITEM]
Memo Entry

B.

Full Name (Last, First, Middle Initial)
Vida at Fontainebleau

Mailing Address 4441 Collins Avenue

City State Zip Code
Miami Beach FL 33140

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-279-40000
Date of Disbursement

MM / DD / YYYY
03 / 04 / 2011

Amount of Each Disbursement this Period

25.40

[MEMO ITEM]
Memo Entry

C.

Full Name (Last, First, Middle Initial)
Cruzan Island

Mailing Address Ft. Lauderdale Int'l Airport

City State Zip Code
Fort Lauderdale FL 33315

Purpose of Disbursement
Travel/Lodging/Meals

Candidate Name

002
Category/
Type

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

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B-279-50000
Date of Disbursement

MM / DD / YYYY
03 / 05 / 2011

Amount of Each Disbursement this Period

10.91

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

<p>A. Full Name (Last, First, Middle Initial) Solo at Fontainebleau</p> <p>Mailing Address 4441 Collins Avenue</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-279-55000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 8.40</p> <p>[MEMO ITEM] Memo Entry</p>
<p>B. Full Name (Last, First, Middle Initial) Solo at Fontainebleau</p> <p>Mailing Address 4441 Collins Avenue</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-279-60000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 4.00</p> <p>[MEMO ITEM] Memo Entry</p>
<p>C. Full Name (Last, First, Middle Initial) Pita Hut</p> <p>Mailing Address 530 41st Street</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Travel/Lodging/Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-279-70000</p> <p>Date of Disbursement MM / DD / YYYY 03 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 13.96</p> <p>[MEMO ITEM] Memo Entry</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

Starbucks

Transaction ID: SB21B-279-80000

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2011

Mailing Address Tampa Int'l Aiport Terminal C

City Tampa State FL Zip Code 33614

Purpose of Disbursement

Travel/Lodging/Meals

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

1.06

[MEMO ITEM]

Memo Entry

B.

Full Name (Last, First, Middle Initial)

Chili's To Go

Transaction ID: SB21B-279-90000

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2011

Mailing Address Tampa Int'l Aiport Terminal C

City Tampa State FL Zip Code 33614

Purpose of Disbursement

Travel/Lodging/Meals

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

2.29

[MEMO ITEM]

Memo Entry

C.

Full Name (Last, First, Middle Initial)

Jerry's Famous Deli

Transaction ID: SB21B-279-100000

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2011

Mailing Address 1450 Collins Avenue

City Miami Beach State FL Zip Code 33139

Purpose of Disbursement

Travel/Lodging/Meals

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

20.61

[MEMO ITEM]

Memo Entry

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
CVS

Transaction ID: SB21B-279-110000
Date of Disbursement

Mailing Address 4040 Prairie Ave

MM / DD / YYYY
03 / 29 / 2011

City State Zip Code
Miami Beach FL 33140

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel/Lodging/Meals

002
Category/
Type

7.99

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

[MEMO ITEM]
Memo Entry

State: District:

B.

Full Name (Last, First, Middle Initial)
Jeff Young

Transaction ID: SB21B-280
Date of Disbursement

Mailing Address 1250 I Street NW, Suite 200

MM / DD / YYYY
03 / 29 / 2011

City State Zip Code
Washington DC 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel/Lodging/Meals

002
Category/
Type

94.87

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
New Partners Consulting

Transaction ID: SB21B-281
Date of Disbursement

Mailing Address 1250 I Street NW, Suite 200

MM / DD / YYYY
03 / 30 / 2011

City State Zip Code
Washington DC 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel/Lodging/Meals

002
Category/
Type

58.42

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

153.29

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)

DSCC

Transaction ID: SB21B-282

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2011

Mailing Address 120 Maryland Ave NE

City
Washington

State
DC

Zip Code
20002

Amount of Each Disbursement this Period

3705.00

Purpose of Disbursement
Administrative/Legal

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Noam Lee

Transaction ID: SB21B-288

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2011

Mailing Address 1718 P Street NW #L-11

City
Washington

State
DC

Zip Code
20036

Amount of Each Disbursement this Period

125.00

Purpose of Disbursement
Travel Per Diem

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3830.00

TOTAL This Period (last page this line number only)

95126.10

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 76 / 77

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Florida Senate 2012

<p>A. Full Name (Last, First, Middle Initial) DSCC</p> <p>Mailing Address 120 Maryland Ave NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB22-158</p> <p>Date of Disbursement MM / DD / YYYY 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 380000.00</p> <p>008 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) DSCC</p> <p>Mailing Address 120 Maryland Ave NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB22-289</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 7000.00</p> <p>008 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Bill Nelson for US Senate</p> <p>Mailing Address 972 W Whitmire Drive</p> <p>City Melbourne State FL Zip Code 32935</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB22-290</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 210000.00</p> <p>008 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

597000.00

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

597000.00

FE6AN026

11020152270

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Florida Senate 2012

A.

Full Name (Last, First, Middle Initial)
 Rick Kuykendall III

Transaction ID: SB28A-30
 Date of Disbursement

Mailing Address PO Box 2129

MM / DD / YYYY
 02 / 28 / 2011

City Fairhope State AL Zip Code 36533

Amount of Each Disbursement this Period

Purpose of Disbursement
 Contribution Refund

2700.00

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
 Carol Ventura

Transaction ID: SB28A-284
 Date of Disbursement

Mailing Address 2520 NW 135th Street

MM / DD / YYYY
 03 / 09 / 2011

City Miami State FL Zip Code 33167

Amount of Each Disbursement this Period

Purpose of Disbursement
 Contribution Refund

250.00

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

2950.00

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

2950.00

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

04-15-11

Date of Receipt

USPS FIRST CLASS MAIL

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

☐

UPS

☐

DHL

☐

AIRBORNE EXPRESS

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

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